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ABSTRACT

The third of 16 booklets designed for use in an Open University course on special education in the United Kingdom, this guide introduces key issues in the course. The variety of handicapping conditions is examined, and age and sex factors in special education are considered. Effects of the environment and the special educational system are also explored. Major trends in the integration of handicapped children are identified, and issues involved in planning, financing, and forming policies related to integration are summarized. Contradictions and inconsistencies in special education are cited, and varying ideologies regarding integration are analyzed. Activity and reading suggestions are included throughout. Five appendices are provided, including an extract from the Warnock report, a list of categories of handicapped students, a list of questions designed to indicate a continuum of integration, the recommendations of the Snowden Working Party, and a report of the Joint Council for the Education of Handicapped Children. (CL)

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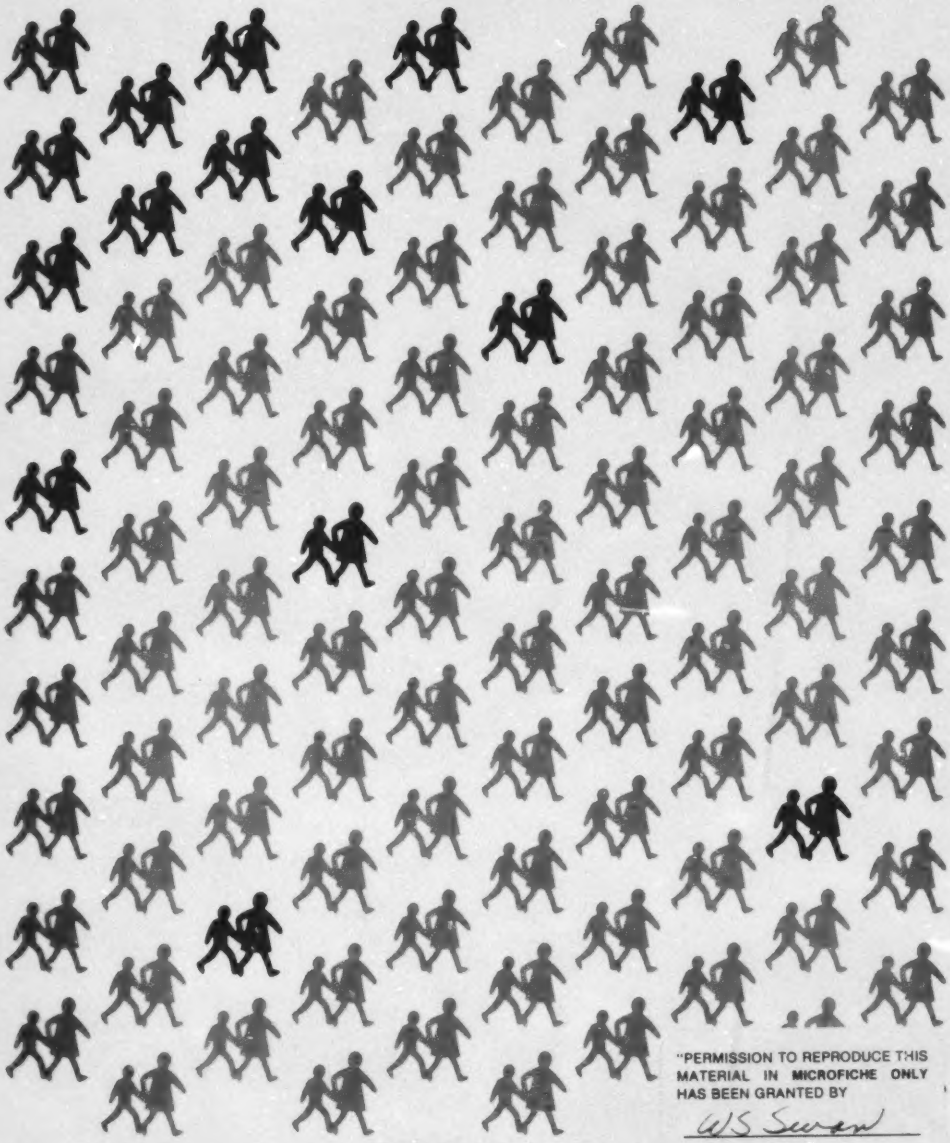
The Open University
Educational Studies: A Second Level Course
Special Needs in Education

ED235612

SPECIAL BIOGRAPHIES



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The Open University
Educational Studies: A Second Level Course
E241 Special Needs in Education

Unit 1/2
Special biographies

Prepared by Tony Booth for the Course Team

Peter Dunne, *The Sunday Times*

The Open University Press

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Note on reading

Set reading

The reading for this unit is to be found in:

SWANN, W. (ed.) (1981) *The Practice of Special Education*, Oxford, Basil Blackwell/The Open University Press (the Reader). It is:

BOOTH, T. (1981) 'Demystifying integration' (Reading 5.1).

The case studies for this unit are to be found in:

BOOTH, A. J. and STATHAM, J. (1982) *The Nature of Special Education*, London, Croom Helm/The Open University Press. They are:

'Special education in a garden hut: the story of Helen Keller' (Case study 1).

'Jenny: a career in special education' (Case study 22).

'Parents' choice: blind girl educated in an ordinary school' (Case study 6).

'Help when it's needed: progress student in a comprehensive school' (Case study 5).

'Another chance: child from a day school for maladjusted children' (Case study 7).

'Emma: child in a residential unit for multiply handicapped children (Case study 2).

'William: a child with Down's Syndrome' (Case study 3).

' "I felt I never had to try." Recollections of a woman who had childhood rheumatoid arthritis.' (Case study 10).

You will also be required to read the five appendices.

Broadcasts

The broadcasts which are part of this unit are Television programmes 1 and 2 and Radio 1. Further details will be found in the associated *Broadcast notes*.

1 What is the course about?

1.1 When I tell some people that I am involved in a course entitled *Special Needs in Education*, they stare at me blankly. When I add that it's about handicapped children they immediately respond, but I know that I may be misleading them in a number of ways. I suspect that they have a picture in their mind of a child in a wheelchair, and possibly another who is 'subnormal'. Yet the subject matter of the course is much wider than the education of physically and mentally handicapped children. It is this broad implication which we wished to capture with the title *Special Needs in Education*.

Handicap

1.2 The course *is* about people who are handicapped, but the word 'handicap' often carries a connotation of severity. We will be examining the whole range of handicaps in education, from those children who are so severely retarded that they never learn to feed themselves, to children who have a minor reading or spelling problem. In some cases it's a matter of personal choice as to whether one wishes to talk of 'educational difficulties' or 'handicap'. The course is about children who are categorized as blind, deaf, maladjusted, physically handicapped, epileptic, educationally subnormal, delicate, autistic, dyslexic, slow learning, remedial and hyperactive. Of these groups, all except the last four are 'official' categories recognized by the Department of Education and Science (DES) and reproduced in its statistics. We will not confine ourselves to official categories, and will be considering seriously the sense and value of such categories.

1.3 'Handicap' can be used even more broadly to refer to any burden or disadvantage which hinders someone from reaching a desired goal. Using this definition, we can include among the handicapped in our society children who are poor, or who live in care, or who are black or female. All of these can be said to be impeded in the race for social status and wealth. All except the last group contribute a relatively large proportion to the total number of children identified as having educational difficulties. Such children are doubly handicapped.

1.4 We will concentrate on handicaps that arise in education, or have educational consequences, and it is these educational implications which will be the primary concern of the course. But, as the title page photograph was intended to illustrate, the problems which arise within classrooms often have their roots in the wider political and economic context, and we will draw on that context to illuminate educational practices.

1.5 Poverty is one of the handicaps which can be prevented, but not in any direct sense by changes within schools. The Plowden Report (Central Advisory Council for Education, 1967) drew attention to the link between poor material circumstances and educational failure. After it was published, a number of the most impoverished sections of cities were designated as Educational Priority Areas (EPAs). Teachers received additional allowances for working in schools within EPAs and the schools received some other extra allowances in an attempt to enhance the educational opportunities of the children. But the role of the community's material conditions in producing educational failure among its children was ignored. There were few direct attempts to improve the basic amenities of these areas. The eradication of poverty and the improvement of housing conditions in inner city and other depressed areas require political and economic solutions. We will avoid the trap of suggesting that the problems which emanate from impoverished material environments can be alleviated by doses of compensatory education (see Unit 14).

1.6 There is, of course, no clear dividing line between those handicaps which have educational implications and those which don't. While researching into attitudes towards physical disability in the US, S. A. Richardson *et al.* (1961) found a remarkable consistency in the way different groups of children rated pictures of 'physical disability'. Their ranking from most preferred to least was as follows:

(a) child with no visible handicap,

(b) child with crutches and a brace on the left leg,

(c) child with left hand missing,

(d) child with a facial disfigurement,

(e) a fat child.

Fatness is not used as a criterion for entry to special schools, yet children with mild physical disabilities are sometimes excluded from normal schools because of fear of bullying by other children. If obesity carries the social stigma in this country that it appears to generate among groups of American schoolchildren, then it has obvious significance for education. June Lloyd (1979), professor of child health at St Georges Hospital, London, writes of obesity as the 'most common nutritional disorder in school children in any society'. She suggests that 'some degree of emotional disturbance' is a likely result and points out the increased risks in adult life of diabetes, arthritis and heart disease.

1.7 I am not suggesting that beautiful fat children *should* be regarded as handicapped nor that potatoes should carry a government health warning. But fatness *is* a handicap if it provokes social stigma, reduces educational participation in athletic pursuits, and increases the risk of ill-health. Of course children should not be stigmatized on the grounds of their appearance or other differences, but they are, and we will be discussing how and why such discrimination occurs.

Teaching problems

1.8 While the course is about problems of learning, it is equally about problems in teaching. It is about children whom educators find difficult to teach; children they cannot control and others who require ingenuity in the design of an appropriate curriculum. In examining how far teachers are prepared to meet the needs of such children, we will be asking questions which concern the whole of the educational system.

1.9 Teachers, like children, are only human. Each school has its share of troubled people, and they are not only children. If children can be disturbed or disruptive or slow to catch on, then so can teachers and administrators and psychologists and doctors. But we will not be concentrating on the emotional and learning problems of teachers, though we are aware that the organization of schools should provide for the needs and interest of both teachers and their pupils.

Educators, families, professionals

1.10 The course, then, is not just about children. It concerns teachers and schools and families and communities. We will be describing and appraising, too, the work of all the professional groups who involve themselves with handicapped children and those that find them a suitable subject for research.

After school

1.11 Children have educational problems which persist after childhood, and we will be looking at the provision for meeting such needs in further education. But there is another, more crucial sense in which the course has to concern itself with the futures of children. For education is always directed towards the future: it 'prepares' children for their lives as adults. We will be scrutinizing the way in which the identification and categorization of children projects them towards certain kinds of future in terms of employment, lifestyle, educational accomplishments and social contacts and skills.

Special education

1.12 Another way to categorize the content of the course is to say that it is about special education. As with handicap, we can give a narrow or broad definition to special education. Some children are officially categorized as handicapped and placed in special schools or classes. In 1977, out of a total school population in England and Wales of 9,000,000, there were 177,177 children attending special schools or classes or awaiting placement.

This represents about two per cent of the school population. In Scotland, 15,119 children, or 1.4 per cent of the school population, were receiving special education provision in the session 1976–7. Table 1 indicates the numbers of children in each category.

Table 1 Pupils ascertained as handicapped and attending special schools or classes or awaiting placement, 1977 (England and Wales).

Blind	1 221
Partially sighted	2 456
Deaf	4 267
Partially hearing	6 006
Physically handicapped	16 138
Delicate	6 272
Maladjusted	20 995
Educationally subnormal: medium	81 011
Educationally subnormal: severe	34 137
Epileptic	1 332
Speech defect	2 308
Autistic	974
Total	177 117

Source: DES, 1978c.

1.13 Some of these categories may make sense to you, while others may seem obscure. The delicate category was introduced to provide 'open air' education for children suffering from malnutrition and respiratory diseases who lived in overcrowded conditions in big cities:

> Most schools for delicate children were opened in the early 1930s. These were the years of economic depression when food was scarce and debility, malnutrition and respiratory ailments among children widespread . . . Ample fresh air in classrooms open to the weather, midday rests on beds in large, unheated 'rest sheds', a good midday meal (often supplemented by breakfast and tea) were almost unvarying elements of the regime.
>
> (DES, 1972, p. 2)

How many children survived the rigours of the cure is not clear, but the role of delicate schools has changed dramatically. Nowadays delicate schools contain a mixture of physically handicapped children and others who trouble educators in a variety of ways, but do not fit neatly into other categories. A school medical officer, for example, once suggested that a child who did not want to go to school and also had asthma should attend a school for delicate children because the local authority would then pay for a taxi to collect him each morning!

1.14 I have included the DES's definitions of educational handicap in Appendix 1. If you glance at the official definitions, you will notice that there is not an official category of autistic children despite the fact that they are represented as a separate entity in official statistics. You might wish to consider how it comes about that some extra groups receive the stamp of official approval.

1.15 By far the largest category of children in Table 1 is the educationally subnormal —moderate(ESN)(M). It comprises half the total number of children attending special schools and classes. The most conspicuously absent group are the multiply handicapped. Many children, particularly within the severely subnormal, physically handicapped and speech defect categories, have more than one handicap. The special care classes within schools for the severely subnormal generally consist of children with very profound physical and mental handicaps. It makes no sense, in such cases, to talk even of a primary handicap.

1.16 The figures conceal considerable regional variations. In some rural authorities the number of children ascertained as in need of special education was about one per cent, whereas in some counties containing large city areas it was three per cent. In one London borough ten times as many children were ascertained as maladjusted as in another. Some differences reflect the variations in educational problems between boroughs, others the

way problems are perceived and handled by teachers and other professionals, while still others merely reflect the fact that the number of children identified generally corresponds to the number of places available.

1.17 Special schools may be day or residential and may be government financed (maintained) or independent (non-maintained). In the latter case the fees of children will be payed, generally, by their local education authority. Table 2 indicates the proportions of boarding and day pupils in the maintained and non-maintained sectors.

Table 2 Pupils in special schools in 1977 (excluding hospital schools) (England and Wales).

	Maintained	Non-maintained
Day	104 878	1 493
Boarding	14 995	7 221

Source: DES, 1978c.

1.18 As you can see, the majority of independent special school places are for boarding pupils. Some of these schools are based on the educational philosophies of particular founding fathers such as Rudolph Steiner, others have been established as business ventures. Most of the children in special boarding schools are actually in the care of the local authority. Children who are thought to need the care and protection of the state and are also categorized as handicapped are often sent to a boarding school rather than admitted to a children's home—I will be discussing this anomaly later. Some children are sent to boarding schools simply because there is no adequate provision for them near their homes.

1.19 Special education for children categorized as handicapped is not confined to special schools. There are units for deaf and partially hearing children, classes for the blind, for the severely educationally subnormal and a wide variety of other groups, all of which are sited in ordinary schools. 21,245 children were placed in designated special classes and units in ordinary schools in 1977. Many children, recognized and classified as handicapped, receive their education in the ordinary classrooms of normal schools, often with additional resources such as technological aids for the physically handicapped or welfare assistants for severely retarded children.

1.20 However, there are groups who receive special education who are not officially categorized.

> Any estimate of the extent of the need for special education has also to take into account the children who spend at least part of their time in special classes set up on the initiative of individual schools. In 1976 classes of this kind were attached to 10,845 maintained schools in England and Wales—nearly 40 per cent of all maintained primary, middle and secondary schools. They made provision, for varying periods of time each week, for 494,248 pupils, of whom 458,087 (4.7 per cent of the school population) had difficulties in learning, or problems of an emotional or behavioural nature, or both. The great majority (82 per cent) of the 458,087 spent less than half, and only 12 per cent spent more than three-quarters, of their time in these special classes.
>
> (DES, 1978b, p. 38)

The majority of these children are in remedial classes or withdrawn from lessons for help with reading. But there are other classes with all sorts of strange titles which cater for a variety of different children. 'Opportunity classes' are provided in some schools for children who don't conform to classroom expectations when they arrive at infant schools. In recent years there has been a rapid expansion of special units for 'disruptive pupils', some of which are sited in ordinary schools, but usually they are separate. Many of the children attending such units are not labelled 'handicapped'.

1.21 But we do not even have to think of categorized children when we think of special education. Special education may be said to occur whenever a persistent difficulty is identified in or with a child, and subsequent steps are taken to improve the situation. In this sense, by far the greatest proportion of special education takes place in the ordinary

classrooms of ordinary schools without extra resources for children who are not officially categorized. The crucial question for these children becomes: how should schools and classrooms be organized so that they have the flexibility to cope with children who experience difficulties?

1.22 You may come across some authors who are at pains to distinguish special education from remedial education and compensatory education. Where possible we will attempt to cut down on the proliferation of titles and labels and see little purpose in such a distinction. Far from elaborating distinctions we will be challenging the basis for considering special education as separate from education in general.

What is special about special education?

1.23 There are three major ways in which special education is distinguished from general education. Most official handicaps are actually defined in terms of the inability of children to follow the curricula in normal schools (see Appendix 1). Special education can be taken to imply the provision of special materials and teaching methods and specialist teachers and other professionals. The extent and nature of these *special curricula* will be thoroughly examined in Unit 5/6.

1.24 Some teachers see the special contribution they make to children with special needs, not as the provision of special materials or methods, but in terms of the degree to which they respond to the needs of an individual child. Teachers in ordinary schools, they argue, just do not have the resources to respond to individuals. Special education, for them, is synonymous with *child-centred education*. However, we might not consider this a distinguishing feature of special education if we believed that *all* children should follow an *individual* curriculum designed for their personal needs and interests.

1.25 The idea of providing a child-centred education for a *few* children leads to a third, and possibly the most important, way in which special education may be distinct. In an ideal world we would make unlimited resources available to all children. In our society with real economic constraints we have to decide on an order of educational priorities. The handicapped are often treated as such a priority. Special education may be seen, then, as *positive discrimination* in education.

1.26 This issue of positive discrimination highlights a recurrent problem in the education of handicapped children. Many people feel that children should not be singled out for extensive tests and official procedures just because they are having difficulty in school. Such a process, they argue, merely serves to highlight the difficulties children experience and adds to their feelings of difference and possible inferiority. But whatever other functions they serve, the assessment procedures undergone by handicapped children are sometimes used to identify those children who are to receive a greater share of resources. Schools find it almost impossible to obtain special resources without submitting the children to special examinations. We may well find that, behind all the philosophical distinctions which surround discussion of special education and special educational needs, 'special' ultimately means 'money'.

1.27 Neither the provision of special curricula nor that of additional resources implies that special education should be conducted away from ordinary schools. Where special education occurs has to be established on other criteria.

1.28 There is a possibility, however, which may have implications for where the education occurs. Special education may be used to incarcerate a group of children to protect others from their influence. This was certainly a sentiment evident in the establishment of the earliest provision but it lingers on in the ethos of schools for maladjusted children and of community homes with education. Is such a sentiment relevant to decisions on the location of special education?

Special education for the gifted

1.29 Children have special talents as well as disabilities, and they win places at ballet schools or schools for prodigious musicians. These children do have special educational requirements and may receive special provision. However, the educational needs of the gifted will not be a major concern of the course. We will be viewing such talents only when they help us to understand and explain other practices in education or when they

concern children who are also handicapped. Some people point to residential ballet schools, for example, to justify other forms of segregated education. They argue that they concentrate resources and provide an intensive education for special groups, and that few question their importance, so why object to residential schools for 'maladjusted' children?

The special educational system

1.30 There is a significant reason why special education is often identified with the provision for the two per cent of children in special schools and classes. Special schools, the teachers in them, their advisers and administrators and the financial arrangements in the shape of special educational budgets, may exist and function in relative isolation from the rest of education. It is not surprising, then, that people often identify special education with a separate segregated special school *system*. These arrangements are so powerfully entrenched that teachers may find it impossible to make special provision for a handicapped child in an ordinary classroom because there is no administrative procedure for transferring money allocated for children in special schools to those in ordinary schools. Teachers within special schools tend to belong to their own professional organizations and local education authorities often perceive the heads of special schools as a separate group who have their own meetings where they discuss shared interests.

1.31 While the word 'system' does imply this notion of separation, it has misleading connotations. It may be thought to imply a highly organized, standardized and interrelated set of institutions, procedures and practices which have been established according to a rational design and which now move along as merrily and smoothly as a quartz watch. But the present set of practices in special education is the end product of a haphazard series of decisions and policies made over many years. There is a tremendous diversity of provision even within one local education authority. In Cambridgeshire, for example, the deaf and partially hearing children are educated in ordinary schools, while many of the blind and partially sighted are sent away to a residential special school. The diversity between local authorities, in terms of expenditure, organization and teaching approaches, is far greater. The existence of this variety of provision forced itself on the attention of the Plowden Committee in 1967:

> Though we have viewed the problem of the handicapped child only from the periphery and have concerned ourselves primarily with the problem of the handicapped child in the ordinary school, it is apparent that children with similar degrees of disability are provided for differently. In one area a child may be in a diagnostic unit attached to an ordinary primary school whereas a child with the same disability in another area may be excluded from school as unsuitable. Some special schools have children who in another authority's area might be in a special class in an ordinary school.
>
> (Central Advisory Council for Education, 1967, p. 304)

1.32 Compared to 'hard' systems, such as quartz watches or chemical processes, special education has, then, the consistency of runny ice-cream. But 'soft' systems have an added complication. For in special education, as in all *social* systems, many of the working components are people. What these people say, think and do *is* the system to a great extent; and these people may disagree or be in conflict. Within any local authority, there are those who would like to see an expansion of special school provision and others who believe that special schools should be phased out and their resources used in ordinary schools.

1.33 Of course, not all the participants in special education have equal power and hence an equal ability to initiate change. In Unit 8 we will look at the distribution of power in the 'system', and there and elsewhere we will explore the manner in which change can be brought about. The impetus for change may not only or even primarily come from the participants in special education. Economic and wider social and political factors may exert the most powerful controlling forces. In such circumstances it is crucial to consider how and whether planned change can be initiated.

Special needs in education

1.34 Over the years there have been a number of suggestions that we cease referring to handicaps in education or categories of special provision, and speak instead of 'special

educational need'. Such a term focuses on the educational implications of handicap and was the one Lesley Webb chose to depict 'children with special needs in the infant school' (Webb, 1967). The Warnock Report, published in 1978, was a particular advocate of this position:

> It is thus impossible to establish precise criteria for defining what constitutes handicap. Yet the idea is deeply engrained in educational thinking that there are two types of children, the handicapped and the non-handicapped. Traditionally the former have generally been thought to require special education, and the latter ordinary education. But the complexities of individual needs are far greater than this dichotomy implies. Moreover, to describe someone as handicapped conveys nothing of the type of educational help, and hence of provision that is required. We wish to see a more positive approach, and we have adopted the concept of SPECIAL EDUCATIONAL NEED, seen not in terms of a particular disability which a child may be judged to have, but in relation to everything about him, his abilities as well as his disabilities—indeed all the factors which have a bearing on his educational progress.
>
> (DES, 1978b, p. 37)

1.35 Referring to a child by her primary handicap is particularly misleading, as I have said already, in the case of the multiply handicapped. A complete description of a child's educational difficulties and requirements is far more useful than an administrative label. The notion of 'special educational need', like 'handicap', can be viewed on a continuum from mild to severe. Teachers have been asked to estimate the numbers of children whom they regard as in need of special education. In performing this exercise they arrive at a figure far higher than the number of children who are actually transferred to special schools and classes. Typical replies estimate that 15–20 per cent of the school population would benefit from such provision. Other studies which have looked at the attainments of children, teachers' views of their behaviour and psychiatrists' estimates of their degree of disturbance have obtained similar figures. The number of problems discovered vary dramatically, as you might expect, from area to area. Schools in an inner London borough have been reported as having 25 per cent of their pupils showing signs of 'psychiatric disorder', and 19 per cent being regarded as very backward in reading (Rutter *et al.*, 1975). Now I don't want to bombard you with figures, particularly because problems of definition are so great that it is difficult to know what the figures mean. But such estimates do indicate that when teachers consider the problems they have with children who are transferred to special schools, they are aware that they have comparable difficulties with a far greater number of children who remain in their schools. After reviewing the quantitative evidence, the Warnock Report made the following recommendation:

> We recommend that the planning of services for children and young people should be based on the assumption that about one in six children at any time and up to one in five children at some time during their school career will require some form of special educational provision.
>
> (DES, 1978b, p. 41)

There are a number of problems with this kind of quantification of special educational need; one concerns money and another the implication that failure in school is a fixed quantity. In simple financial terms it would seem to be unrealistic. Are the authors of the report actually suggesting that we multiply the additional resources allocated to special schools and classes by ten in order to cater to the needs of this wider group? Could they really be suggesting this at a time when educational budgets are being severely reduced?

1.36 As you may have guessed, they are not so rash, but without actually attributing their problem to financial constraints they are well aware that they have to resolve it:

> We recognise that the recommendation that statutory categories of handicap should be abolished may give rise to concern about how to safeguard the interests of children with severe, complex and long-term disabilities. We have found ourselves on the horns of a dilemma. On the one hand we are aware that any kind of special resource or service for such children runs the risk of emphasising the idea of their separateness, an idea which we are anxious to dispel, and of limiting the notion of special education to the provision made for such children. On the other hand, unless an obligation is clearly placed on local education authorities to provide for the special needs of such children, there is a danger that their requirement for specialist resources will be inadequately met.

> In order to resolve this difficulty, we have tried to devise a system which, while avoiding the disadvantages inherent in categorisation, will preserve the advantages which it confers. *We recommend that there should be a system of recording as in need of special educational provision those children who, on the basis of a detailed profile of their needs prepared by a multi-professional team, are judged by their local education authority to require special educational provision not generally available in ordinary schools.* There will be many children in ordinary schools whose need for special educational provision can be readily met with appropriate support in the school they are attending; these children will not need to be recorded as requiring special provision, since it will be unnecessary to formalise the obligation on authorities to provide education for them suited to their abilities and aptitudes. Only those children who have been assessed by a multi-professional team and, in the light of the team's assessment of their needs, judged by the local education authority to require special educational provision will be recorded by the authority in this way. The system of recording will thus safeguard the interests of the minority of children with special educational needs who have severe and complex disabilities or difficulties.
>
> (DES, 1978b, pp. 44–5)

1.37 We find, then, that the report suggests that only those children with 'severe and complex disabilities' should be *recorded* as 'in need of special educational provision'. In contrast to the estimate of the larger group who do not require recording, there is no actual mention of the numbers of children who have more pressing problems. Could it be that they correspond to the two per cent who are already singled out for special provision: the group for whom local authorities in the UK are actually willing to make generous positive financial discrimination? But being open about the scarcity of resources and their rationing makes it difficult to sustain the idea of special educational provision being geared to need. Children cannot get what they need if they have to make do with what they are given. It would be absurd to imagine a limitless special educational purse but then it is misleading to pretend that a child's educational needs could be identified independently of the constraints of local authority purse strings. In the US the permitted recording level for 'exceptional need' is 12 per cent of the school population; a case of looser but broadly similar constraints (see Unit 10).

1.38 But let us turn to a second issue involved in quantifying the special needs of children. This can be brought out most clearly by rephrasing 'there are 20 per cent of school children who have special educational needs' to read 'there are 20 per cent of children whose needs schools fail to meet'. There are two senses of 'need' which the Warnock Report confuses. I need food in order to live and may be said to have a need for food irrespective of whether I have just eaten or not. But if I have just eaten I am not *in need of* food. Similarly, the only children who are in need of special education are those whose needs schools fail to meet. Discovering the numbers of such children is a far more important and challenging task than assessing the number of backward readers in a school. A child who cannot read will spend a miserable day if her only occupation is staring at incomprehensible signs, but a similar child could spend a productive and happy day engaged in tasks she can master. The first child is in need of special education, the second is actually receiving it. In assessing need we should not be testing children but scrutinizing the curricula that are provided for them and the school environment within which it is provided. The very idea that one in five children is likely to need special educational provision at some time in their school career has an inevitability about it which may discourage schools and teachers from actually meeting the needs of pupils when they arise. The use of screening instruments, as advocated by the Warnock Report, to pick out children by measuring their attainments or behaviour has to be a mistaken venture. For in judging whether a child is in need of special education we have to look at *the match* between her needs and the educational environment provided for her.

1.39 Neither is it sufficient to establish that the curriculum within a school is within the capacity of a particular child, for it must also cater for her specific *interests*. And if we say *that children are in need of special education when schools fail to provide a curriculum which is appropriate to their capabilities and interests* then we may have to push the numbers of such children far higher than 20 per cent in some schools and some classrooms. Equally the number may be far lower in a particularly good school even if that school contains a large number of children struggling to learn to read or trying to settle from the distractions of unpromising home conditions.

1.40 In mentioning a child's interests, we highlight another hazard in talking of educational needs. Needs can only be defined in terms of desired ends or goals. When we speak of a need for food the goal is uncontroversial. It is self-evident that children should be fed and that to receive food is in their interest. But we may also speak of children's needs when the 'desired' goals are more contentious. Children may be in need of 'a good hiding' or 'a disciplined mind'. The needs we 'discover' for children always reflect the views and values of a particular group of people. We have to ensure that these views and values include the rights and interests of the children and their families. Education always involves a complex set of moral decisions. Towards what kind of society should children be directed? How are the goals we select reflected in the way schools are organized and the content of their curricula? Discovering the special needs of children always involves moral choices about the purpose and content of their education.

1.41 Of course schools labour under real constraints of examination systems, their own histories, and an economic climate which foreshadows no reduction in the number of children taught by each teacher and which creates classrooms in which children are expected to develop independent study habits without books. In pointing out that schools often do not cater for the needs and interests of children I am not ascribing blame. I am suggesting, rather, that we take a close look at them and discover how their problems have come about and what can be done about it.

1.42 In thinking about the issues raised in this course I suggest you bear three numbers in mind; the two per cent of children who are currently ascertained as in need of special education; the larger group who are conventionally regarded as having similar problems in ordinary schools who are not so identified; and the still larger though very different group to whose needs and interests schools do not currently respond. Throughout the course it will be emphasized that the problems of these groups are inextricably linked.

Special education: opportunity or punishment?

1.43 From what has been said, it might seem that the placement of a child in a special school or class would always be greeted with enthusiasm. Special schools have favourable teacher–pupil ratios and are relatively well-endowed financially. But special school placement is often not welcomed particularly by the families of children who are classified within the educationally subnormal (moderate) and maladjusted categories (see Table 1). It is quite easy to imagine the reaction of such parents. Parents often take great pride in the accomplishments of their children, and they are disappointed if they do badly. What counts as doing well or badly is something we learn within our culture and colours our feelings about our own lives as well as the lives of others. Of course, people do not all have the same aspirations, but few would aspire to being labelled educationally subnormal or maladjusted. Having one's children so labelled may come as an unpleasant shock which may have considerable personal repercussions. These feelings may be mitigated by the approach and facilities of a particular special school, but parents are likely to retain the goal of having their child returned as 'normal' to mainstream education. Unfortunately children do not move from special schools back to ordinary schools with particular regularity.

1.44 In fact, sending a child to a school for maladjusted children may be used as a threat. Maladjusted schools may be seen as lying at an extreme along a continuum of punishment, which starts with sanctions in ordinary schools, may involve suspension from school, and ends with special school placement. This confusion of 'maladjusted' with 'naughty' and 'delinquent' lies behind the remark of a chief education officer that 'maladjusted schools are the arsehole of the education system'.

1.45 As we shall see in a later section, the wish to see their children as participating members of ordinary schools is felt by families with children outside the two categories I have mentioned. Many parents challenge the assumption that special education for their children should be provided in special schools rather than ordinary schools. Yet often there is no appropriate choice available. Where disabled people have become organized and articulate, they have often voiced their dislike of segregated schooling, a view well represented in the evidence to the Snowdon Working Party (National Fund for Research into Crippling Diseases, 1979).

Special biographies

1.46 The phrase 'special biographies' is intended to draw attention to two aspects of the course. One is the difference that the presence and identification of handicap makes to a child's life. This difference may be seen in terms of the expansion of some opportunities and the closing off of others. The second is the large number of people who are involved with handicap as members of a family or professionally as teachers, administrators, doctors, psychologists, researchers and writers. Of course, all of us are concerned with handicap to some degree though most of us could have far greater contact than we actually do. And this would have been the case if we had been educated alongside the whole range of handicapped children in school. All of us, then, have a special biography, the story of our connection with the handicapped, and under different circumstances all our stories could be different.

1.47 The first two television programmes will take up this theme. They trace the education of mentally handicapped children through schools in one area of the country. These children are attached to ordinary schools throughout their educational career irrespective of the severity of their handicap. The programmes also look beyond school, at the provision in adults' training centres and at the possibilities of open employment. They give an idea of the effects of the presence of a handicapped child on other family members and of the alternatives in provision available in other areas.

A statement of intent

1.48 I am using these units both to introduce the field of special education and to give you advance warning of the character of the course. We are including case studies of the experience of children and adults in their schools, places of work and families. These are the people who live the results of administrative decisions, of policy change, of psychometric test reports. But it would be a mistake to concentrate on personal experiences, for these make sense only in the wider context of existing provision, budget limitations, and practices handed down through generations of teachers, administrators and professionals. Understanding human practices involves a constant weaving between the levels of personal action and institutional constraint.

1.49 In the next section I will take a detailed look at the groups of children who are identified as having problems in schools. In the third section I will look at some of the key issues to consider in planning for handicapped children in ordinary schools. Finally, section 4 will present some ideas to help you decide between alternative approaches.

Reading Now read 'Special education in a garden hut: the story of Helen Keller' (Case study 1). Try to think of the implications for the way you think of special education. It will have a different meaning for each of you. Below are my reactions to the case study.

Comment (a) The special education that Helen received made a spectacular improvement in her life. In a short time she made considerable educational and personal progress. This contrasts markedly with the results of special education reported for other groups of children.

(b) Her teacher provided a flexible curriculum that was closely related to Helen's personal interests.

(c) Helen was obviously a child with considerable intellectual powers.

(d) The special education she received was not tied to a particular school or place.

(e) The teacher exercised considerable control over Helen and appeared to take over from the family. This may well have been a 'normal' upper class practice. In fact she may have taken over this role from the black servant.

(f) The family regarded Helen's participation in normal family life as the principal measure of her improvement.

Reading Now read 'Jenny: a career in special education' (Case study 22).

Comment (a) Jenny's career as a special teacher moved from a special school to an ordinary school, where she became aware of the power of the mainstream curriculum and organization to create and alleviate the problems of children who receive special provision.

(b) Her career was restricted by the jobs that were available. Although initially she intended to teach in an ESN(M) school, she found herself working in a day school for maladjusted children.

(c) She emphasized the gap that exists between training and teaching, where people may be isolated from others working on similar problems and from developments and trends in special education.

(d) She mentioned the recurring theme of how special provision may be seen as a solution to the problems of mainstream teachers, rather than to the difficulties of children. It is quite common for teachers in a remedial department to have to resist attempts to transform their role into working with 'disruptive' pupils.

(e) In working with children with difficulties in an inner city school it is possible for a teacher's efforts to be spread so thinly that she can feel that she is achieving little. Jenny stressed the improvement in her work as she concentrated on fewer children at the start of their secondary careers.

2 *Which children are identified as having problems?*

Approaches to categorization

2.1 In the last section, I indicated the way 'handicap' and 'special education' can be given both a narrow and broad definition, and looked at the way the broader concept was encapsulated by the phrase 'special educational need'. I mentioned the system of official categories and the relative numbers of children in each which comprise the two per cent of children receiving segregated special schooling. Official labels are misleading if they promote the illusion that children can be divided into 'ordinary' and 'special' children or the 'handicapped' and 'non-handicapped'.

2.2 The Warnock Report exemplifies a trend to broaden the concept of special education to include up to a further 18 per cent of children with significant but often less severe difficulties, but this view is perfectly compatible with the traditional approach in an important respect. For the method of obtaining the incidence figures indicates that the additional 18 per cent of children are viewed as having broadly similar problems to the two per cent. It involves a question of the form, 'How many children have problem *x*?' (where *x* stands for one of the official categories or another identified problem). I suggested that a more challenging view of special education would ask a rather different question of schools, 'How many children have needs and interests which the schools fail to meet?' Now it may be that the adoption of the notion of 'special educational needs' would lead to a careful reappraisal of the needs and interests of children and hence question the prevailing approach. But there is no suggestion within the Warnock Report that the authors recognized that needs would be interpreted very differently if they were seen from the point of view of the child *and her family*.

2.3 In this section I will attempt to look beyond the official categories, to the children who are identified as having problems. In looking at official procedures for the identification and recording of children's problems one may be misled into believing that the procedures involved are clear and unambiguous. An apparently neat procedure may obscure a haphazard human process. In the real world children have a wide variety of capacities, interests, skills, experience, knowledge and temperament, and may encounter an infinite range of difficulties in their lives at different times, for different durations, and different reasons. The official view of special education attempts to squeeze this highly complex

children's world through a template with a few broad slots. One of the reasons that this simplified view of children's difficulties persists is indicated in the opening paragraph of this unit. People tend to identify the notion of handicap with people who have a physical disability. They also tend to base their views of all children's difficulties on their ideas of children who have physical impairments. While it is clear that children who cannot see do have something wrong with their bodies it is not at all clear who has a problem if a child 'misbehaves' in class.

2.4 I am not suggesting that we should not think of children in groups or categories. In fact I can't see how we could think about the world at all if we did not categorize it. I am urging instead that we do not take 'official' categories for granted, but attempt to understand how they are derived and whether they are sensible or useful. One of the major objections to basing the system of categories on the notion of disability is that the educational implications of a 'disability' are far from clear. What educational implication follows from the designation 'physically handicapped', when it can mean a child with a bad limp, or a child with no arms or legs or a child who is also grossly retarded? If there is no one educational implication for each identified disability, then we may have little justification for placing children in special education on that basis. We may even *increase* the educational task by doing that. Similarly it is unlikely that a number of children, all thought to be violently disruptive, will facilitate each other's learning by being taught together in one classroom.

2.5 Educational classification in terms of disability is criticised in the Warnock Report: 'It follows from what we have said about the different forms of special educational need that the particular form presented by an individual child is not necessarily determined by the nature of any disability or disorder suffered by him.'

Reading I have included the whole of the section 'A new system to replace categorization' from the Warnock Report as Appendix 2. I suggest you read through it and then jot down the system of informal categories (yes!) by which it is suggested that we refer to children.

Comment As you see, the 'new' system looks rather similar to the one it is intended to replace. You will have to decide which particular set of categories, if any, you wish to retain to refer to children. One problem in making a choice is that children are already discussed and sorted using a set of labels which you may not have chosen. When one refers to the groups that have been sorted out in a particular way it is often easiest to use the label by which they have been selected. I find myself using two sets of labels, those I would like to see applied to children and the ones that already are. If I confuse you at times, perhaps you can appreciate the source of my confusion.

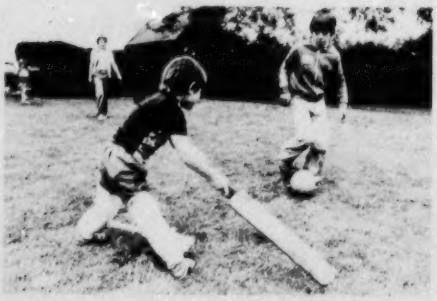
2.6 In what follows I have tried to take a fresh look at the complexities of children's lives and to select a set of features which designate those children who are identified as having problems in school.

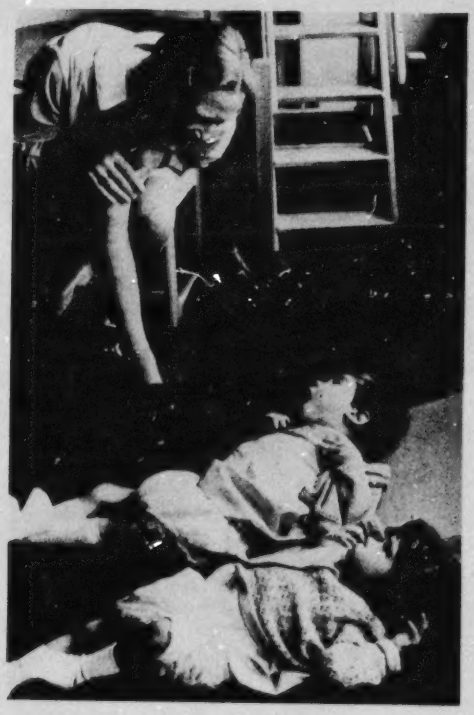
Children with physical impairments

2.7 We will always have to recognize that some children are physically impaired. They may be blind or deaf or born with a physical deformity or damage to the brain. Physical impairments may also be the result of diseases, such as muscular dystrophy or Still's disease (childhood rheumatoid arthritis), or road accidents or accidents in the home. Physical impairments vary in severity and in their educational implications. An intellectually alert child with paralysis of the lower limbs may require no extra educational resources, though some additional physical care.

2.8 Sensory handicaps, arising from disorders of sight or hearing, are often distinguished from other physical handicaps arising from damage to other parts of the body, which are in turn distinguished from intellectual handicaps, though in practice the same child may have sensory, physical and intellectual handicaps. Rubella (German measles) in the early months of pregnancy may cause deafness, blindness and severe subnormality and physical immaturity in a child. Down's Syndrome may be associated with heart defects.

Different place, different handicap





Down's Syndrome, which is the result of a chromosomal abnormality (usually an extra twenty-first chromosome) is often associated with intellectual difficulties. However, for many children with intellectual or mental handicaps there is no identifiable physical defect. Only some intellectual handicaps can be legitimately classified as 'physical'. As you can see from Table 3, in a sample of 19 schools for the severely subnormal, Leeming *et al.* (1979) found that more than 40 per cent of the children in this sample had no identified physical defect.

Table 3 Percentage of children in major diagnostic classification in 19 schools.

Category	Percentage
Down's Syndrome	34.3
Cerebral palsy	9.1
Hydrocephaly	5.7
Microcephaly	4.7
Autism/psychosis	2.4
Phenylketonuria	1.2
Other categories	2.3
Undefined or unknown	40.3

Source: Leeming *et al.*, 1979.

2.9 For many 'physically handicapped children', it may be their looks rather than their physical or intellectual limitations which contribute most to their handicap. Children with Down's Syndrome are sometimes confined to schools for the severely subnormal, even though they have greater intellectual capabilities, because teachers in schools for the moderately subnormal do not wish to have children in their schools who *look* handicapped. Severely deformed children, such as those whose bodies were misshapen by the action of thalidomide, may have real difficulties of mobility, but even greater problems may be caused by their unusual shape, which may provoke alarm in others and embarrassment or despair in themselves. What can be done to minimize such 'secondary' handicaps?

Prevalence of physical handicap

2.10 In Table 4 I have reproduced a comparison of the prevalence of physical handicap found in two surveys. The prevalence rates in the two surveys are remarkably similar, with the exception of the figures for eczema. Eczema and asthma are by far the most common defects reported. Cleft palate does not have a separate mention. Orthopaedic conditions include all abnormalities and deformities of bones and joints.

Table 4 Prevalence of physical handicap per 1000 children.

Handicap	Seebohm Report 5–15 years	National Child Development Study, 1958 (Cohort) 7 year olds
Blind and partially sighted	1.2	1.9
Deaf and partially hearing	1.2	1.1
Epileptic	7.2	6.2
Cerebral palsy	3.0	2.2
Heart disease	2.4	3.6
Orthopaedic condition	3.4	4.6
Asthma	23.2	27.4
Eczema	10.4	24.7
Diabetes	1.2	0.2
Other physical handicaps	6.7	6.7

Source: Younghusband *et al.*, 1970.

2.11 Such prevalence rates tell us little about the educational needs of the children, partly because definitions of a particular handicap vary from study to study. Compare the numbers of blind and partially sighted children and deaf and partially hearing children with the numbers receiving special education (Table 5).

Table 5 Children with sensory handicaps in full-time special education, 1977 (England and Wales).

Blind and partially sighted	3 460
Deaf and partially hearing	5 738

Source: DES, 1978c.

2.12 While similar numbers of aural and visual problems are encountered in one study, and a higher number of visual problems are recorded in the National Child Development Study, the number of children actually receiving special provision for hearing difficulties is much greater. Why do you think this is so?

2.13 One possible explanation is that sight defects can be corrected more precisely than hearing problems. Without glasses, I would be partially sighted. Even with categories as apparently clear cut as sight and hearing defects, it is extremely difficult to interpret incidence figures and differences in provision. When you examine the official definition of partial sight or hearing you find that the definition includes the notion that children with such difficulties are 'unable to follow the normal regime of ordinary schools without detriment to their sight or to their educational development'. But what if the school provides an *abnormal regime*, an abnormally flexible curriculum?

2.14 There are also difficulties in assessing the numbers in other categories of physical handicap. The disorders of movement resulting from brain damage, known as cerebral palsy, can be severe or barely detectable. In recent years it has become common to infer brain damage in a child who has slight difficulty in movement, particularly if this is associated with educational difficulties. Such children, sensibly enough, are called clumsy. Sometimes, however, their collection of symptoms is given a medical sound and they are said to exhibit the 'clumsy child syndrome' which is thought to be indicative of minimal brain damage. The problem is that if you can't actually tell if they have brain damage then you don't know whether they are being clumsy or 'clumsy'.

2.15 The numbers of children with different physical impairments varies over time. In the past paralysis as a result of polio was relatively common. In the future, with the innoculation of girls against rubella, the defects caused by German measles during pregnancy may be eradicated (see Unit 14 and the reader article associated with this unit—Reading 5.1).

2.16 Not only do the numbers with a particular impairment vary, but the implications for education depend on the degree to which the educational environment can be adapted for a particular child's needs. If every school had easy access for the disabled and could allow some degree of curricular flexibility then greater numbers of physically handicapped children could be educated in ordinary schools, provided of course that the resources were transferred to support their education (see Unit 11).

2.17 In the case of children with some bodily damage or defect it is useful to keep in mind a distinction between *impairment* and *handicap*. 'Impairment' can be used to describe the actual extent of bodily damage or defect, 'handicap' represents the problems that are the impairment's consequence in a particular social context. An impairment is physical, but a handicap is social. Children may be blind because of damaged eyes, but the way they grow up will be shaped by the attitudes and behaviour of others and decisions which people in our society customarily make about blind people.

2.18 Not all handicaps have an identified underlying physical impairment at their root. Children who find themselves labelled maladjusted or educationally subnormal are not usually found to have damage to their brains. Poverty and poor housing are problems which are entirely social in origin. In such cases an impairment associated with poor health or bad nutrition may actually be a direct consequence of an initial social handicap.

Reading Now read 'Parents' choice: blind girl educated in an ordinary school' (Case study 6).

Comment (a) Mary is a bright girl, educated successfully alongside other children in a normal school.

(b) Her capacities were considerably underestimated when she was sent to a residential special school.

(c) Her family had to challenge the local education authority persistently in order to exercise a degree of choice over Mary's school placement.

(d) In moving to a residential school Mary felt deeply deprived of normal family life.

(e) There were no additional costs involved in her attending normal school, but a transfer of resources in the shape of the support of a welfare assistant. The parents provided her board and lodging and after school care as well as considerable additional educational support.

(f) There was a great variation in the willingness of schools and teachers to adapt to the needs of a handicapped child.

(g) Mary is a friendly, sociable girl, who is determined to face the problems of her blindness and see the unthinking remarks of others as a fault in them rather than a threat to her identity.

(h) The flexibility which the schools have been prepared to show in Mary's case have implications for the education of a wider group of children within her school.

(i) Mary's disability has meant that she has to work harder than other children in order to cover the same ground. Further developments such as taped lessons and texts may ease her burden and also benefit others.

Children who fail in school

2.19 The two groups of children who cause most concern to teachers in ordinary schools are those that don't learn and those that don't behave. I will look at school failure first before turning to issues of discipline.

2.20 Teachers expect to achieve certain standards with children, and become concerned when children do not reach them at the correct ages. The children who most concern them are those who do not learn to read as quickly as others, or who have difficulty in understanding speech or expressing themselves. Of considerably less concern are children who don't calculate. You may have your own ideas about why that should be so.

2.21 Children vary in terms of their capacities, their attainments and their interests, and yet they are generally taught in large groups. But how can a teacher give instructions or lead a discussion or explain a historical event if some of the children in the group cannot cope with the complexity of the language used? One answer has been to attempt to make classes as homogeneous as possible, by grading children rigidly into streams, with those whose literacy level is particularly low being placed in remedial classes. Even in the remedial class, the search for uniformity of attainment may make the lowest achievers candidates for the ESN(M) school.

2.22 The alternative to the search for perfect homogeneity is the development of child-centred teaching, where children perceive their education as a continuous, personal process, which originates in their needs and interests and is maintained and initiated by them. But unfortunately each child does not have a personal tutor guiding and developing her interests, as Ann Sullivan did with Helen Keller. Teaching in English schools can only aspire to be a compromise between child-centred and classroom-centred education. The extent to which child-centred curricula can be realistically developed is a theme which is taken up in Unit 5/6.

2.23 The history of provision for children with low academic attainments is intimately connected with the answers people have given to the question, 'Why do children fail?' One obvious answer is that they fail because their abilities are limited. They are incompetent because they can't learn. That was the thinking that informed the establishment of the concepts of educational subnormality and ineducability. Those children who

failed in school through lack of ability were to be separated and sent to special schools. Before 1971 the most severely retarded children were sent to training centres, remained under the 24 hour care of nursing staff in subnormality hospitals or stayed at home. Parents were under no compulsion to send their 'ineducable' children for training; they could be 'trained' but not 'educated'. The next group of children were the educationally subnormal who didn't learn well because of their limited intellect. These groups were distinguished from normal children on the basis of IQ tests which, after their inception, were surrounded with an aura of magic. The science of mental life was at hand echoing the sentiments of Dickens's Thomas Gradgrind, 'With a rule and a pair of scales, and the multiplication table always in his pocket, sir, ready to weigh and measure any parcel of human nature, and tell you what it comes to' (Dickens, 1854, p. 48 of the paperback edition).

2.24 But this approach, which divided children into the ineducable, the limited, and the normal, was subject to two major realizations. On the one hand it became apparent that many of the most severely mentally handicapped children could learn; they might even take an active interest in learning and derive pleasure from their achievements. They wouldn't learn classics, but could be educated according to their interests and capacities. The book which summarized this change of heart most succinctly in its title was Segal's *No Child is Ineducable* (1967). As a consequence of this change of attitude, all children, however retarded, were brought within the education system.

2.25 The second, connected, realization was that the measured IQ of a child did not give a clear picture of his educational difficulties. The educationally subnormal were said to have IQs below 70, and the ineducable, IQs below 50. But how could arbitrary cut-off points on the results of a test define the population into three *naturally* distinct groups? In practice the educational difficulties of children overlap considerably across the boundaries of these groups. The criteria for educational subnormality were widened in England and Wales in recognition of the numbers of children with educational difficulties who did not have IQs below 70. But when the category was widened, school failure could not be attributed to one simple cause. There could be many explanations for educational failure apart from the possession of 'little natural ability'—a phrase which is still used in the Scottish Regulations.

2.26 The category of educational subnormality was defined in the 1959 Regulations as follows: 'educationally subnormal pupils, that is to say, pupils who, by reason of limited ability or other conditions resulting in educational retardation require some specialised form of education wholly or partly in substitution for the education normally given in ordinary schools'. But how many children are educationally retarded according to this definition, two per cent, or 20 per cent, or 40 per cent? And if vast numbers of children are to be regarded as educationally subnormal, why select only a few of them for education in special schools? 'Educational subnormality' is an odd term to use to describe this large and varied group of children who experience failure for all sorts of reasons.

Table 6 Numbers of children in special schools for the educationally subnormal, 1950–77 (England and Wales).

	1950	1955	1960	1965	1970	1975	1977
Medium	15 173	22 644	32 815	42 670	51 768	52 744	55 698
Severe						19 892	22 839

Source: DES, 1978c.

2.27 The provision for children designated as educationally subnormal exhibited a tremendous growth rate between 1950–77, as shown in Table 6. More recently there has been a rapid growth and then decline in the numbers of children identified as having speech defects, another group which can be seen to fail to meet the demands of the 'normal' curriculum. The reasons underlying the changing trends in officially categorized children will be scrutinized in the next section.

2.28 A second explanation for educational failure interprets the problem not as emanating from the inadequacies of children, but from the failure of teachers and schools and families to cultivate the natural abilities of children. On this view children have a natural

thirst for knowledge which is curbed by inappropriate teaching methods. This interpretation of educational failure is sometimes called the progressive or liberal critique of education. John Holt (1969), with his book *How Children Fail*, became its most popularized exponent but it is a notion made explicit in this country in the Plowden Report (Central Advisory Council for Education, 1967), and lies behind substantial changes in the ethos of primary schools. Margaret Donaldson finds a similar culprit in her book *Children's Minds*. Like many others, she notices that the experience of failure increases as children progress through the education system:

> We are faced now with something of a puzzle. In the first few years at school all appears to go very well. The children seem eager, lively, happy. There is commonly an atmosphere of spontaneity in which they are encouraged to explore and discover and create. There is much concern, on the part of the teachers, with high educational ideals. These things tend to be true even in parts of the community which are far from being socially privileged in other ways. However, when we consider what has happened by the time the children reach adolescence we are forced to recognise that the promise of the early years frequently remains unfulfilled. Large numbers leave school with the bitter taste of defeat in them, not having mastered even moderately well those basic skills which society demands, much less having become people who rejoice in the exercise of creative intelligence.
>
> (Donaldson, 1978, pp. 13–14)

Now, there are all sorts of processes at work as children are propelled towards the labour market which might account for a progressive disenchantment with schools. Margaret Donaldson, however, sees the issue solely in terms of competence: 'There are two possible defensive conclusions that may be drawn: either that large numbers of children are indeed irremediably stupid and must just be written off, or that large numbers of teachers are not doing their jobs properly.' And it is the inculcation of skills which she decides is the real problem: the development 'of which has not been understood well enough, and widely enough'.

2.29 Of course there is a mirror image, the 'conservative', interpretation of school failure, which proposes the formal inculcation of basic skills in disciplined surroundings as the only cure for backwardness. This is the solution of the Black papers, which gained some credibility from Neville Bennett's study (1976), which indicated that children performed to a higher standard in some 'formal' classrooms than under some 'progressive' regimes.

2.30 The liberal and conservative critiques of education both challenge the efficacy of teaching methods, but neither relates the personal problems of pupils and teachers to the society which structures their experiences and aspirations. Fear of failure and concern with success are deeply embedded in the structure of our society and educational system. Anyone with any doubts about that should examine their own experience and the experience of their friends. They might try reading Edgerton's *The Cloak of Competence* (1967), which describes the incredible efforts on the part of adults classified as 'subnormal' to appear normal. This attempt at 'passing' for normal may be a preoccupation of far more people than the identifiably deviant. This feeling is captured by Woody Allen in *Play it Again Sam*, when he is explaining to the character played by Diane Keaton how she should inform her husband that they have made love: 'Why don't you just say "You're a woman and I'm a man and this is just what *those* kind of people do?" '

2.31 Whether children fail or not has something to do with their capacities and motivations and something to do with the way their education is organized. But it is important to distinguish between incompetence and failure. Children who can't do the high jump very well are not usually regarded as educational flops. A child can improve her competence in reading without ever feeling she had made a transition from school failure to success. Failure is a term applied only after a child's performance has been compared with that of others or some anticipated standard of achievement; it is socially defined. There may even be a connection, so that failure produces incompetence.

2.32 It is not just teachers' lack of knowledge of the process of learning and teaching, or children's incapacities, which produces educational failure and imposes limits on the levels of educational competence. The very structure of our society demands that some people must be regarded as failures. Sharp and Green (1975) performed a detailed study

of an English progressive primary school. Far from the school being an island of egalitarianism, the teachers, in their use of labels, attitudes towards the children, and view of curriculum standards, were actively reproducing a view of society in which some succeeded and most failed. Margaret Donaldson concludes at the end of her book that a general increase in intellectual competence would challenge the existing social order. But could it be that the existing social order is itself the barrier to educational progress?

Reading Now read 'Help when it's needed: progress student in a comprehensive school' (Case study 5).

Comment (a) The approach to Matthew's difficulties varied drastically from school to school and teacher to teacher.

(b) He seems to have fallen on his educational feet by chance.

(c) The case study emphasizes the differences in point of view that may arise between parents and teachers.

(d) Matthew's school is relatively unusual in its organization and in its approach to remedial work. It has genuine mixed-ability teaching in the first three years and remedial work is conducted solely on a withdrawal basis. This means that co-operation over the curriculum between remedial and other staff is essential. One wonders why Matthew has books he can cope with only in remedial lessons. Could more be done to adapt the rest of the curriculum to his individual needs?

Children who muck about

2.33 The prospect of occupying thirty children productively for one whole day would fill most adults, particularly non-teachers, with horror. Add to that the injunction that the children are to be confined to one room and are to remain seated, and for many the task would be beyond belief. It is small wonder then that the issue of control occupies an important place in the minds of teachers or that on occasion they resort to drastic or even magical methods in an attempt to produce it. (The attitude to uniforms might best be understood in the latter category; the control of school dress is used to stand for and magically incorporate the control of children.) Nor is it surprising that teachers may be keen to be rid of children who muck about, nor, for that matter, that children, in their turn, sometimes find it difficult to remain quiet and seated shut up in a room with twenty-nine others and a teacher.

2.34 There have been continual shifts of emphasis in the way children who present discipline problems are described. Are they naughty or disturbed, troubling or troublesome? In June 1980, the *Milton Keynes Gazette* carried an article introduced in this way:

Bad boys in a class of their own

REBELLIOUS children in Milton Keynes could find themselves sharing a classroom containing some of the naughtiest boys in Britain.

While the popular view of undisciplined children is often that they are just plain naughty, the educational view has been more complex. In theory a distinction has been drawn between naughtiness and 'maladjustment', as in the report on indiscipline by Comber and Whitfield (1978): 'Broadly speaking the cases of indiscipline fall into two categories:

(i) those resulting from natural high spirits sparked off by some environmental factor

(ii) those resulting from some deep-seated psychological causes' (p. 51).

2.35 But in defining children within this second category as 'maladjusted', the distinction has usually been blurred. Robert Laslett, in a widely read account of the education of maladjusted children, described 'maladjustment' in the following way:

> The school situation is one where children's ability to co-operate, to accept competition, to accept adult authority, and to acquire learning skills, makes demands upon their abilities to adapt and respond. Increasing demands are made upon their personal and social adjustment, demands which most children are able to meet with satisfaction or enjoyment. They successfully adapt their behaviour as the demands upon them increase and they acquire new confidence from their successes. In this process, fortunate children depend upon their environment and take adults' affection, encouragement and good example for granted. They rely upon what they can observe in their environment and, unknowingly, upon infantile experiences which are the invisible foundations of their successful development.
>
> Most maladjusted children cannot make the same assumptions about their environment, and their infantile experiences have not laid the foundations for successful development. Their experiences have left them with disabilities and, for some of them, their environment has aggravated their disabilities into a handicap.
>
> (Laslett, 1977, pp. 1–2)

For Laslett, an inability or unwillingness to conform to the school's demands is a sign of disturbance. Like Comber and Whitfield, he suggests here that these demands tax only the abilities of children 'to adapt and respond'. Yet in talking of a *maladjusted* child we assume the existence of a situation or person to whom the child is *not adjusted*. Maladjustment, like handicaps in general, can only be the result of an interaction and, if we are to discover what to do about it, we have to examine all aspects of the situation in which it is identified. The position has been complicated further since 1970 when the old 'approved schools', designed as places of punishment for delinquents, came under the control of social services departments and were renamed 'community homes with education'.

2.36 There was never an intention to make 'maladjustment' describe both discipline problems and unhappy and troubled children but certainly the provision that was established came to be used in that way. And it was the children who posed a threat to classroom control, rather than quietly depressed or unhappy children, who occupied the preponderance of places, although the latter group are most often discussed in official documents. Since 1945 maladjusted pupils have been officially defined as 'pupils who show evidence of emotional instability or psychological disturbance and require special educational treatment to effect their personal, social or educational readjustment'. The Underwood Report on maladjusted children (Ministry of Education, 1955) specifically excludes 'bad behaviour, delinquency, oddness or educational subnormality' as identifying maladjustment, though they might be caused by it. The same report describes the framework within which maladjustment was conceived. A network of child guidance services was to be provided throughout the country to provide an initial treatment for children with troubled emotions, and it was in this context that the incidence of maladjustment could be assessed.

> 372. Even if there were an area with a sufficiently adequate child guidance service to ensure that there was no accumulation of cases awaiting attention—and there is certainly no such area in the country at the present time—there are other variable factors which would need to be taken into account. One element of uncertainty is the average length of time which a course of treatment is likely to take. The severity of maladjustment varies and the troubles of some children will clear up much more quickly than those of others; treatment also is itself an elastic process, depending on the approach and methods of the staff responsible for giving the treatment. Another element of uncertainty is the

number of children who may need to attend a clinic at more than one point in their school career.

373. In order to obtain a reasonably accurate picture of incidence which could be used for planning, it would be necessary to select several areas with a sufficiently adequate child guidance service to ensure that all children requiring treatment were discovered and treated, and to secure from each of these areas the following estimates:

(i) the number of maladjusted children who began to be treated at a child guidance clinic in the course of one year;

(ii) the number of these who had previously had courses of treatment and been discharged as cured;

(iii) the duration of the treatment of each child discharged as cured during the year, and the amount of time which each of the different members of the team devoted to him during the course of treatment.

It will be many years before there is any area in the country with a well enough developed service of sufficient experience to answer these questions with any hope of accuracy.

(Ministry of Education, 1955, p.96)

2.37 This approach emphasizes the continuum of difficulties perceived as maladjustment and the impossibility of producing accurate incidence figures. In 1955, too, the number of places for children in schools for maladjusted children was relatively small and it would have been implausible to identify 'maladjusted provision' with 'separate provision'. In fact the real growth in provision took place in the sixties and seventies, as shown in Table 7.

Table 7 Maladjusted provision, 1950–77 (England and Wales).

	Number of pupils						
	1950	1955	1960	1965	1970	1973	1977
Boys	467	1 029	1 426	2 305	4 793	8 172	10 452
Girls	120	206	316	399	1 300	2 322	3 235
Total	587	1 235	1 742	2 704	6 093	10 494	13 687

Source: DES, 1978c.

2.38 Schools did not see this growth in formal provision for maladjusted pupils as fulfilling their need to cope with problems of classroom control, and during the seventies there was also a rapid development of special units to cope with 'problems of non-attendance and disruptive behaviour in schools'. Pamela Young, David Steed and Jean Lawrence (1980) made a careful study of this phenomenon which they describe as 'the emergence of a new category of child'. They examined the minutes of local authority meetings and built up a picture of the rationale for such units.

> It is quite clear from the LEA materials we have inspected that it is suspension procedures which create the kind of difficulties for the authority which the units are designed to solve. One finds, for example, in a set of Education/Social Services Committee working party minutes, that Item 88, on Suspension of Pupils from School, reports on the proposal to set up a unit for disruptive pupils. The same minutes refer to a central problem relating to suspension: 'the danger of a trend towards permanency', i.e. the difficulty of bringing to an end a period of suspension by the reabsorption of the pupil into the school system. The reabsorption may be made difficult because of the strong reluctance of the pupil's school, or some other school, to have him/her back either because of the violent nature of his outburst/s which make him a danger to staff and pupils, or because he has been so chronically disruptive that his rehabilitation in an ordinary school environment is highly unlikely. Placement in a special school may be difficult to arrange without a long delay, and is unlikely to be sought for older secondary pupils. Given this situation, a suspension may become 'permanent', so that the authority which does not offer home tuition on the grounds of expense or appropriateness for the case, may be shown to be in contravention of its legal requirement to educate. The provision of an off-site unit avoids the authority's dilemma. No ordinary school need be asked, at least

in the short-term, to receive the pupil, though he/she can remain on the school roll. The authority meets its statutory obligation, and can, with some justification, argue that it is meeting the special educational and socialisation needs of the pupil in the unit.

The main problem, which the unit is expected to solve, is that of pupils who cause disruption in school, but the unit is also often seen as helping with the problem of serious non-attendance cases, including cases of school phobia. Although the unit appears at first sight to be as expensive, where it is used in lieu of home-tuition, it may in fact be more economic than it appears to be. One authority, for example, in its Coordination Subcommittee minutes, gives estimates for the cost of setting up a pilot unit, and points out that the effect would be to cut expenditure on the home-tuition of pupils who were school-phobic or excluded from school for disciplinary reasons. The figures quoted are Home Tuition 2 hours per day—£150 per term per pupil. The minutes suggest that the unit could take twenty pupils and that, apart from educational considerations, the economic advantages would be great. Another authority suggested they were cheaper in the long run than borstals or treatment centres!

(Young, Steed and Lawrence, 1980, pp. 57–8)

2.39 In 1978 the DES published a survey 'of the provision of special units for disruptive pupils in ordinary schools excluding those provided through special education procedures'. The development of this provision is set out in Table 8.

Table 8 Numbers of disruptive units (1966–77).

Year	1966	1968	1970	1972	1974	1976	1977
Number of units	6	14	23	39	124	215	239

Source: DES, 1978a.

2.40 Such units were spread evenly across county and municipal authorities and were 'not, as might have been supposed, predominantly an inner city phenomenon'. In 1977, there were 3962 children attending 239 units. The great preponderance of children were of secondary school age. 70 per cent of the units were not sited on the premises of a contributory school. The period of most rapid expansion appears to have been between 1972–6, and there is a hint of a tailing off after that (DES, 1978b). However, a survey conducted in 1980 by the Advisory Centre for Education (ACE) indicates a different story. Initial reports, when they had received replies from two-thirds of the local education authorities, indicated that in 1980 these authorities had 439 'disruptive units' catering for 6791 pupils. In the Inner London Education Authority (ILEA) alone there were 226 units catering for 3800 pupils. In the ACE survey, 'disruptive units' included places with the titles 'tutorial units', 'exclusive units', 'sanctuaries', 'adjustment units', 'assessment units', 'withdrawal units', 'support units', 'educational guidance centres', 'day units', 'nurture groups', 'off-site support centres', 'retreat centres', 'havens', and 'opportunity groups'. The returns are not strictly comparable, therefore, with the DES survey.

2.41 In the seventies there was an increasing willingness on the part of LEAs to make special provision for children specifically because they were 'naughty'; a tendency caught in the colloquial phrase, 'sin bin', to describe such places. However, it would be a mistake to believe that all provision identified as 'disruptive units' fulfilled that purpose.

2.42 The way in which disruption is often defined indicates the heterogeneous nature of concept. Mills (1976) conducted a survey into secondary school behaviour viewed by teachers as seriously disruptive. The four categories of behaviour which had the highest incidence were, in descending order:

- Deliberate rejecting of school standards in dress.
- Persistent truancy.
- Cutting lessons.
- Individual misbehaviour intended to destroy lessons.

If some teachers include such a range of events under the title disruptive, then they must have some common significance for them. Disruption involves, for some, the breaking of school rules rather than just aggressive, noisy or disturbing behaviour. Disruption may be any threat to the existing order.

2.43 In view of the diverse reasons for which a child may be placed in a disruptive unit and the broad range of activities which may enable a child to be accepted at a maladjusted school, it is surprising that some people understand the two forms of provision in totally distinct ways. The reporter of the ACE survey specifically distinguished disruptive units from special educational provision. 'We were not concerned with special education, a very different and clearly defined category.' That may be the 'outside' view of special education, but closer acquaintance provides a quite different impression.

Reading Now read 'Another chance: child from a day school for maladjusted children' (Case study 7).

Comment (a) When Max arrived at the day maladjusted school, there was no clearly formulated plan for his education. This was at a time when school changes were likely to increase his failing grip on school life.

(b) He had a background of insecurity which was constantly reproduced within school.

(c) The problem of transfer from one school and its curriculum to another is crucial in special education and will be considered in detail in Unit 5/6. During Max's first attempt at reintegration into a secondary school, there were very poor attempts at planned support and co-operation.

(d) The experience of being with a group of assertive children in a special school seems to have lowered Max's view of himself.

(e) In placing Max in a special school there was no suggestion of 'remediation' or 'treatment'. Placement was viewed as an alternative to ordinary school that would continue 'until senior school at least'.

(f) After a period of stability in the special school, Max does seem to be making a successful transfer to ordinary school, but clearly his problems and their causes may continue and the future will have its twists and turns.

(g) Max is a black child. What influence this may have on his view of himself and on the attitudes of teachers and others will be mentioned later in this section and explored more fully later in the course.

Reading Now read 'Emma: child in a residential unit for multiply handicapped children' (Case study 2).

Comment (a) Emma's problems do not fit into any neat category. Both her teachers and parents found her difficult to control and her difficulties were exacerbated by her severe communication problems, her epilepsy, her educational retardation and her high level of activity.

(b) Her parents found that Emma's problems rebounded on the rest of the family and threatened the marriage to such a degree that residential placement seemed the most appropriate course to take. In the absence of local provision they sent her to Beech Tree House where there were a group of staff with the confidence and skills to embark on an attempt at bringing Emma back into the orbit of her family and community.

(c) The co-operation between parents and workers at the unit was exceptionally good.

(d) The referral procedure to the unit was a hit and miss affair, depending on Emma's mother noticing an article about the school in the press and exerting personal pressure on her LEA.

(e) The unit operates a two year 'rule', and makes a concerted attempt to change a child's circumstances within this period.

(f) The unit was dependent on the voluntary goodwill of Emma's local schools and on chance contacts with a school near the unit. There was no system for reintegrating Emma back into school and community. They were dependent on the deployment of funds at the discretion of individuals within the LEA.

(g) The unit has to predict the kind of future for which it is preparing a child. If a child moves on to a residential setting she must be prepared for group living, and personal skills adapted to home life may be irrelevant.

Unhappy children

2.44 As I have suggested, the maladjustment category was intended to apply to children with troubles and sorrows as well as those who presented teachers with discipline problems. In actual practice it has been the identification of a discipline problem which has usually been the first step in referring a troubling child to special educational placement. But, of course, there are a significant number of children who need special care, consideration and respect during the school day because of the unusual emotional burdens with which they contend. Many teachers will have come across, at some time, a child who has witnessed death or who has been physically abused. All will have met children feeling the effects of conflict between their parents. I have been surprised at how quickly some teachers expect children to recover from the death of a parent and return to the routine of classroom life.

2.45 Primary schools' organization gives classroom teachers the possibility to recognize and perhaps alleviate the distresses of children. In secondary schools pastoral care systems have arisen, in part, to mitigate the effects of frequent changes of classroom teachers. Inevitably pastoral care is often a euphemism for a chain of disciplinary control, and once again the control and caring functions of educators may become inextricably confused.

2.46 I find it unhelpful and confusing when words such as 'psychiatric disorder' are used to encapsulate distressed children (Rutter *et al.*, 1975). These are very often children who are facing the 'ordinary' yet unfortunate consequences of stressful family circumstances, often exacerbated by poverty and poor housing, restricted play space and an anticipated bleak future.

Unusual children

2.47 Some teachers become attuned to the discovery of children with special needs in such a way that they watch out for any unusual behaviour as a sign of an inner disturbance. I remember a child in a nursery school who played happily with the other children and apparatus, but was referred to me when I worked as an educational psychologist because he would sometimes throw his hands in the air in a somewhat startling manner. Another boy was referred because of his discrepant interests for a boy in a tough East End borough of London. He would come to school and approach his teacher with an opening gambit such as, 'I watched the sparrows playing in the blossom this morning and felt the sun on my face.' Young boys who dressed up as girls in the Wendy house were sometimes referred for fear that they were developing undesirable sexual tendencies. In the true spirit of Queen Victoria, I never received a complaint that a little girl was dressing up as a boy. So it goes.

2.48 One of the teachers in Sharp and Green's (1975) study spoke of her children in this way:

> . . . but you see, all of these, a lot of these children are, sort of, difficult, peculiar, you know, difficult in some way, but you can't honestly state yourself, you know, they're abnormal or disturbed. I mean I talked to you about Jean and Mary, well, they're not what I would call normal little girls, by any stretch of the imagination, but there's nothing I could put my finger on to say they're abnormal. They're just different.
>
> (Sharp and Green, 1975, p. 72)

There is an assumption that we all share a common picture of normality and all agree on who is deviant or abnormal. The official categories of handicap make this assumption, yet we all know of the tremendous diversity of activities and predilections among people. I saw another child who was rather solitary in her nursery school and then moved into the first class of the infant school. After a period I called in to see her new teacher. The teacher's opening words to me were 'oh she's much improved now, she's really beginning to learn how to be competitive'. So it goes.

2.49 The largest group of children categorized because of their 'bizarre' actions are those who are called autistic. As you might expect, such children differ one from another,

and there is a dispute over what constitutes 'pure autism'. Through pressure from voluntary groups, considerable separate provision is now made for 'autistic' children, and, as I mentioned, their numbers appear in the official statistics even though they do not figure as an 'official category' in the current DES regulations. Some of the commonest features picked out to designate autistic children are: severe problems in communication, unresponsive and undemonstrative in their affections, a tendency to exhibit habitual mannerisms, and the possession of capacities and competences which distinguish them from the severely subnormal. It is this last fact which is the key to the success which parents have had in persuading local authorities to provide their autistic children with special facilities. Many autistic children are the offspring of articulate middle-class parents who have resented their inclusion in the lower status category of the severely subnormal. The dyslexia lobby may be seen in a similar light. It's great to be bright, it's sad to be a slow learner but it's not so bad to be dyslexic. The facts and fallacies about the neurological basis for such groups will be discussed in Unit 11.

The disadvantaged

2.50 The great preponderance of children receiving special education are working class. This is particularly true for children identified as slow learners or maladjusted or disruptive. But it is also true for children with physical handicaps. The babies of working-class mothers are more likely to die at birth or to be injured before or during birth (Office of Health Economics, 1979). In the sixties and seventies, education was seen as a vehicle for altering this trend. Social mobility, the reshuffling of social class positions within society, has been sought through an attempt to provide equal educational opportunity for all classes. This was the intention behind the introduction of comprehensive education but it was also the intention of the architects of the selective system. Intelligence tests were used in an effort to ensure that grammar school places were occupied by the most able, irrespective of class. This policy has not had vast success. Working-class kids still get working-class jobs (see Willis, 1977) and an overwhelming proportion leave school at sixteen. Whether resources should be expended in an effort to shake up social class positions is an issue to which I have already alluded and to which I will return.

2.51 Working-class children make up the bulk of the school population, and most of them can only be regarded as disadvantaged in relation to middle-class aspirations. However, it is worth drawing attention to certain minority groups whose position in life places them among the handicapped in a wider sense.

Children in poverty

2.52 In 1979 Peter Townsend published a major study, *Poverty in the United Kingdom*. His figures were drawn from surveys done ten years before publication, and at that time, according to the government's measure of poverty (income at or below the supplementary benefit level), 3,000,000 of the population were in poverty. This figure is unrealistically low. If we include those people who live in households where the income is below the actual income of those on supplementary benefit (including additions for housing and discretionary income) then 12 million people were at or below the standard.

2.53 Within this group certain sub-groups are particularly vulnerable. Children in large families, and, in particular, the children of one-parent families are much more likely to suffer. It is evident from Table 9 that poverty in one-parent families is primarily, though not exclusively, a problem that affects lone mothers.

Table 9 One-parent families and poverty.

Sex of parent	Number of families	Percentage in receipt of supplementary benefit	Number of children
Female	520 000	44	920 000
Male	100 000	7	160 000

Source: DHSS, 1974, vol. 2, p. 32.

2.54 Poor families tend to be concentrated in areas of poor amenities which contain sub-standard housing. Philip Tunley, Tony Travers and John Pratt (1979) documented the variations in conditions in the London borough of Newham. They found that children from socially deprived areas tend to attend schools which are less well provided than those attended by less disadvantaged children, and that local authority procedures reinforce this relationship in a number of ways. One of the discriminatory features of local policy involved the allocation of fewer resources to schools which had few children remaining after the statutory school leaving age. Naturally enough, the most disadvantaged were the hardest hit.

2.55 Despite efforts after Plowden to discriminate in favour of 'areas of special need', in some places there has been a reverse trend. Poverty can lead to poor educational provision and is also associated with relatively low educational attainments. Peter Wedge and Hilary Prosser (1973) drew attention to the marked lowering in educational chances of groups of children living in adversity in their monograph *Born to Fail?*. 'By the age of eleven, one in 14 of the disadvantaged children was either receiving or was waiting to receive special education, compared with only one in 50 of ordinary children'. Wedge and Prosser had built up a composite picture of disadvantage, which included living in a large family and having a lone parent as well as the more conventional notions of poor housing and poverty, and you might wish to question such a broad application of the term. In another study of 'socially disadvantaged families selected from the "inner ring" areas of Birmingham and characterised by overcrowding and a lack of basic amenities', Philips (1979) estimated that approximately half his sample of boys would qualify for special educational provision.

2.56 Striking differences in attainment do occur between *groups* of children differing in material conditions. Poor material conditions are a handicap and they *tend* to be associated with further educational handicaps. However it would be a mistake to believe that an individual child's future can be predicted with any accuracy solely on the basis of his family's income. Hutchison, Prosser and Wedge (1979) have attempted to redress this impression in their article 'The prediction of educational failure'. They found that the best predictors of 'educational failure' at sixteen years were earlier measures of educational attainment. Children who perform poorly in school when they are seven and eleven years old tend to persist in their relative performance until they leave school. What implications does this have for remedial efforts in schools? Which children might be expected to do poorly when they leave school if remedial efforts were successful?

Children in care

2.57 In 1977 there were 101,000 children in care in England and Wales. Most of these children were in local authority children's homes run by social services departments, yet for the handicapped this position was very different.

> For handicapped children in search of a substitute home, there have been very different and often very inferior developments. While some severely physically handicapped children have gone to boarding schools others have gone to live in long-stay hospitals. For most of the severely mentally and multiply-handicapped children, what we now know as mental handicap hospitals have offered the only alternative home to their family one. Over thirty years after the Curtis Committee reported on the Shocking State of Childcare, there are still children living away from their own families in conditions as shabby and insensitive to their need for warmth, affection and stimulation as the orphanages ever were.
>
> (Shearer, 1980, p. 2)

2.58 The placement of a child in a mental handicap hospital is a social practice which could be changed. There have been repeated exposures of the undesirable conditions in many such hospitals on the media and in the press. On 11 August 1980, the *World in Action* team documented appalling conditions in Smith Hospital in Berkshire. Children were unsupervised while violently attacking each other, they consumed their own excrement, and their personal possessions, brought to the hospital by their parents, disappeared. Many hospitals for the subnormal are characterized by an inability to permit their residents any sense of personal identity, and this is a feature of some of the better as well as the worst. How does it come about that some of the most vulnerable members of our

society living forty years after the establishment of the welfare state can be brutalized in this way? Where are the caring professions? Where are the caring communities?

2.59 Many of the 21,000 children in special boarding schools in 1977 were actually in the care of LEAs, and this was particularly true for the ESN(M) and maladjusted groups. And for those children in local authority homes a relatively high proportion had physical or educational handicaps (Shearer, 1980).

2.60 These figures raise a number of issues. Being in care is itself a handicap. The reduction of adults' options as a consequence of having been in care as a child is well illustrated by the reflections of adults looking back on their experiences in care (Kahan, 1978). As things are, both 'normal' and handicapped children are often provided with inadequate substitute homes when they are in care. Staff mobility, as well as the frequent practice of moving children from short-stay to long-stay provision, ensures repeated emotional discontinuities in children's lives.

Black children

2.61 Since the late sixties it has been apparent that children whose families are of West Indian origin have been over-represented in special schools and other special educational provision in the UK. The over-representation of immigrant groups in special education has also been a feature of other European countries in recent years (Dybwad, 1970).

2.62 In the UK, black people experience discrimination in housing and employment opportunities. There has been a tendency to regard black people as merely a part of the nation's disadvantaged, but it is quite clear that their position is connected with the colour of their skin (Rex and Tomlinson, 1979; House of Commons, 1977). The possession of a black skin is a social handicap in Britain. Section 11 of the 1966 Local Government Act recognized this in its allocation of funds to local authorities who made additional provision in areas of high immigration.

2.63 While both West Indians and Asians experience discrimination in employment and housing, there is evidence that it is children of West Indian origin who meet most difficulties in education. The assessment of the evidence is hindered by the absence of comprehensive statistics since 1972, when the DES stopped seeking separate returns on black pupils. In fact both the 1977 Select Committee on race relations and the Home Office response to it (Home Office, 1978) advocated the resumption of such data collection. The Home Office document established the terms of reference of the Rampton committee which is investigating the educational position of West Indian pupils. It published an interim report early in 1981, which confirmed the considerable underachievement of West Indian children when compared with white and Asian pupils in six LEAs (House of Commons, 1981).

2.64 The 1972 statistics had defined an immigrant pupil as either a child born outside the country whose parents were also foreign born, or a child who, although born in the country, had parents who had arrived in the country within the previous ten years. Despite the cumbersome and euphemistic nature of this definition, the relative proportions of 'immigrant' pupils in special schools in 1972 emerged quite clearly. Look at Table 10.

Table 10 Immigrant pupils in special schools, 1972 (England and Wales).

	Country of origin		
	West Indies	Cyprus, Gibraltar and Malta	India
Number of immigrant pupils	101 898	15 217	56 193
Percentage of total immigrant pupils	36.4	5.4	20.1
Percentage of total immigrant pupils in special schools	66.1	5.6	9.9

Source: DES, 1973.

2.65 Children whose families originated in the West Indies were a third of all immigrant pupils, but they accounted for two-thirds of the immigrant pupils in special schools. Although most of them were in ESN schools, Table 11 demonstrates that they were also over-represented in schools for maladjusted pupils as well as for sensory handicaps.

Table 11 Children of West Indian origin in special schools, 1972 (England and Wales).

Child population	West Indian Percentage	UK as a whole Percentage
ESN	3.26	0.85
Maladjusted	0.23	0.10
Blind and partially sighted	0.08	0.03
Deaf and partially hearing	0.32	0.06

Source: DES, 1973.

2.66 How did it come about that more West Indian children were filtered through to special schools? The higher incidence of sensory handicaps may be closely associated with relatively poorer living conditions and may be inseparable from the general effects of disadvantage. But additional reasons are seen as important in accounting for their underachievement in ordinary schools, and over-representation in maladjusted provision. Raymond Giles (1977) has given a careful analysis of their social position in *The West Indian Experience in British Schools*. He sees the differences between black and white working-class children in their opportunities for social mobility as a major problem. Able black children are directed towards skilled trades rather than higher education because it is felt that such a social position represents the permitted limits of their achievement. Several authors have found blanket stereotypes applied to black children by teachers. The deputy headmistress in one comprehensive expressed an opinion that:

> West Indian children definitely were different . . . they exploded quicker: 'It is the difference between being on the side of a volcano and being on the side of a hill.' In response to the question, 'What does this mean for teachers?', she replied, 'Teachers just have to recognize that they can explode faster and recognize that some things might spark them off, and not fan the flames, because they do lose their tempers.' I asked if there were any positive attributes associated with these characteristics. She replied that there was: 'They don't hold grudges against you very long.' She also said that West Indian behaviour was not the same as British, and that a 'frightfully middle-class British child would not ever lose their temper, even a working-class white kid. But the West Indian children say exactly what they think about you, and even some of the things they don't think about you, but they want to say it because that is the way they express themselves'.
>
> (Giles, 1977, p. 76)

Sally Tomlinson (1981) also found that a tendency existed among educators to regard the problems they had in teaching West Indian children as originating from a natural property of the child, and hence were intransigent. 'The children were "bound to be slower, it's their personalities" or they were "a representative bunch . . . slow, docile and low functioning".' Similarly with behavioural problems teachers identified children of West Indian origin as possessing 'the usual problems, hyperactivity and anti-authority'. 'If I referred every West Indian with temper tantrums, I'd refer them all.'

2.67 Some teachers do use stereotypes to frame their expectations and experiences of black pupils, and this may be part of the explanation for the higher incidence of West Indian children in ESN and maladjusted provision. The interim report of the Rampton committee (House of Commons, 1981) called this tendency in teachers 'unintentional racism', and saw it as an important factor in accounting for the low levels of achievement in West Indian children:

> In the eyes of many West Indians, the major cause of their children's underachievement is racism and its effects in school and society. Although there are inevitably some teachers who hold explicitly racist views, they are very much in the minority. We did, however, find evidence of what we have described as unintentional racism in the behaviour and attitudes of other teachers. This may take the form of stereotyped or patronising attitudes towards West Indian children, which, when combined with negative views of their academic ability and potential, may prove a self-fulfilling prophecy. Whilst we cannot accept that racism, intentional or unintentional, alone accounts for the underachievement of West Indian children in our schools, we believe that when taken together with, for example, negative teacher attitudes and an inappropriate curriculum, racism does play a major part in their underachievement.
>
> (House of Commons, 1981, p. 70)

2.68 While it is impossible to give a precise picture of the trends in special school placement since 1972, there has been no lessening of the black community's concern about the educational chances of their children, whose general underachievement has been amply confirmed. Nor has there been a reduction in claims that black pupils are more likely to be suspended from school and placed in maladjusted provision. In 1980 there was a furore about the numbers of black children placed in 'disruptive units' in Birmingham, which has set an independent inquiry in motion. The Rampton committee's report repeated the plea that ethnically based national statistics be gathered on special education placement as well as standards of achievement.

Sex differences in special education

2.69 Whenever the numbers of handicapped children or the children attending special provision are analysed according to their sex we always discover a preponderance of boys, as Figure 1 shows.

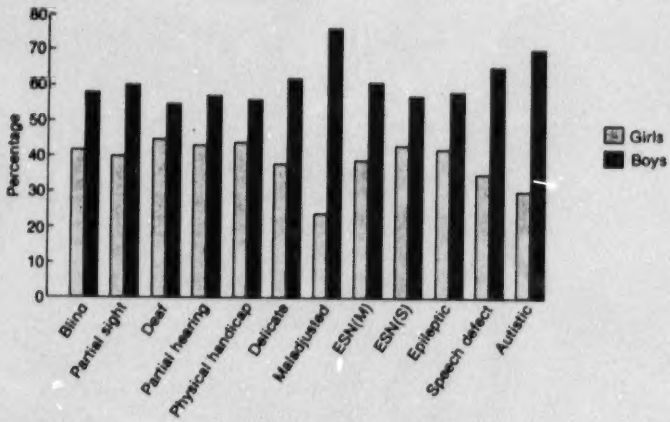


Figure 1 Children in special schools by sex, 1977 (England and Wales).

2.70 There is a preponderance of boys in all categories, but the maladjusted and autistic groups show the most marked differences. We have already discussed the concept of maladjustment and its association with 'naughtiness' and problems of discipline. Many teachers find boys more difficult to control than girls and this is certainly reflected in the statistics. Boys *are* more aggressively assertive than girls if this is measured in terms of open violent conflict or by acts of 'vandalism'. The huge differences between the actions of boys and girls cannot be accounted for simply in terms of the relatively small biological differences between the sexes, and we will be returning to accounts of such differences in later units. The larger number of boys labelled autistic will be examined in Unit 11. Is autism, which may manifest itself as a severe and bizarre disruption of communication, a biological defect or the result of a difficult upbringing? Are there as many ways of becoming autistic as there are of being labelled disruptive or maladjusted?

2.71 But boys do seem to be vulnerable to a whole host of physical handicaps. They predominate in the statistics for birth abnormalities and this is reflected in part in their greater proportion in provision for all physical handicaps.

2.72 The preponderance of boys receiving special provision is not confined to special schools. Patricia Potts worked at one time as a remedial teacher in a Child Guidance Clinic, before she joined the Open University. She has collated and summarized the procession of children through the clinic (Potts, personal communication). During a four-year period 76 children attended the clinic's remedial class, and 60 per cent of these were boys. This preponderance of boys receiving remedial help will be familiar to many teachers. But the reasons that children come to the clinic in the first place were revealing. Many of the boys had been suspended from school and several of these moved on to schools for maladjusted children or other provision for 'disruptive' pupils. Most of the girls who came to the clinic had failed to attend school for some period.

2.73 The children that are picked out for inclusion in special schools for a whole range of handicaps, may, therefore, be the most troublesome and this may bias many of the figures towards boys. Some evidence for this view comes from a study of 'early education of children with special needs' by Chazan *et al.* (1981). These authors asked health visitors and teachers in two LEAs, one in England and one in Wales, to identify all the four-year-old children they perceived as having problems. After the first stage of the research, they found that 52 per cent of children 'identified as having problems were boys', and this is a much smaller majority than found in any category of special school. While these differences still held when the children and their families were examined in more detail, there were some exceptions. More girls were found to have defects of vision and more to be 'over-dependent' and 'withdrawn'. The investigation does highlight the difficulty in defining and measuring problems. One parent's over-dependent child may be another's 'good cuddle'; a 'withdrawn' toddler could be viewed by someone else as developing a private life of her own.

Age trends in special education

2.74 In attempting to provide you with a picture of the children who receive special education, I have analysed the composition of the special school population according to age. I have used the figures from the statistics gathered in 1977. The figures for children with a physical handicap are illustrated in Figure 2.

2.75 Presenting the figures in this way gives a misleading picture. It would appear that there was an increasing tendency to refer children who are physically handicapped to special schools until they reached the age of around 12. However, this trend merely reflects the profile of the school population, as can be seen in Figure 3.

2.76 In 1977 the 'bulge' in the school population was at 12. There were actually 873,000 twelve year olds in school as opposed to 752,000 five year olds. In Figure 4, I have presented the figures for the physically handicapped, maladjusted and ESN(M) and ESN(S) categories expressed as a percentage of the school population at each age.

2.77 As you can see, there is no tendency for the relative numbers of children in ESN(S) schools or schools for the physically handicapped category to increase with age. This is a pattern which is broadly reproduced in other handicaps with a physical basis, such as the blind and deaf. Such children are 'detected' early in their lives and directed towards special schools where they remain until school-leaving age. How might the figures for such categories appear if special schools were used to equip such children to cope with life in normal schools?

2.78 The figures for the maladjusted and ESN(M) categories exhibit a very different pattern. Children in such categories are identified later in their school career and additional children are picked out for placement in such special schools throughout the statutory school period. The figures give a clear indication of the greater difficulties of discipline and curriculum provision that teachers face in the later years of primary school and in secondary education. Children who can be productively occupied in the infant school come to be viewed as problems as the aims of education focus more and more on academic success and classroom conformity. How would the graphs appear if special schools were actually used to prevent serious educational and emotional problems?

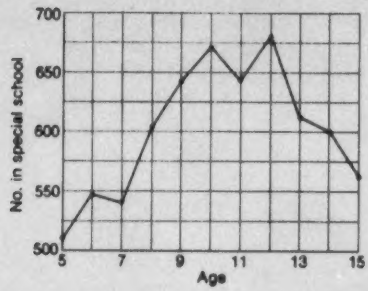


Figure 2 Children in schools for the physically handicapped at ages 5–15, 1977.

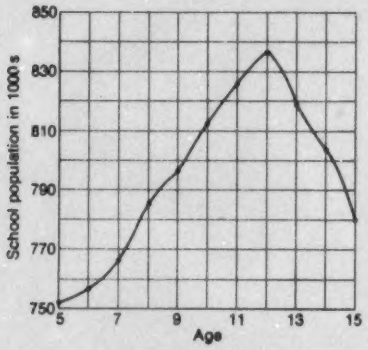


Figure 3 Total school population by age, 1977.

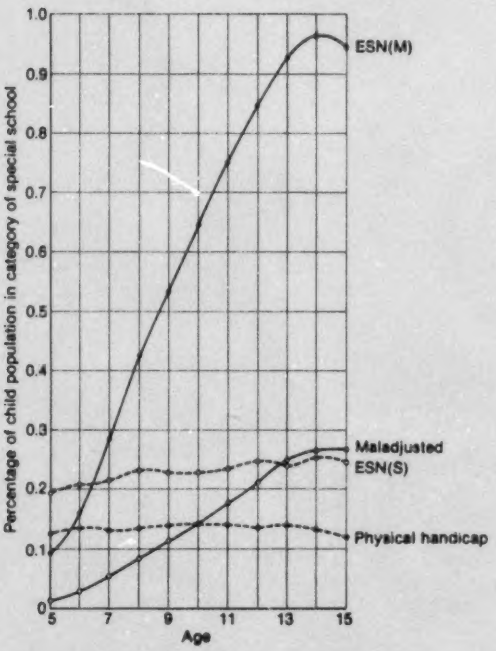


Figure 4 Percentage of total school population at special schools by age, 1977.

2.79 A special school 'career' generally lasts from the time a child enters a special school until the school-leaving age. In the next section I will be questioning the need to separate 'handicapped children' along separate educational paths. But before turning to the issue of integration, I will give a brief review of the ways people account for handicaps and educational problems.

How do we account for problems?

2.80 I hope you have gathered that the reasons we can give for the development of problems in children and for their ascription as handicapped are many and varied. Sometimes they may originate in a physical defect or impairment, and at other times they may be the result of inflexible schools or of poverty. Even when children are afflicted with profound physical disabilities their lives, and hence their degree of handicap, will be deeply affected by their social circumstances. I have chosen two sources to give you a glimpse of how some writers account for children's problems. The first is from Carl Milofsky, an American sociologist. He presents three very different cases and gives a clear indication of where he regards the sources of the problem to lie.

> At the core of problems public school educators face is the difficulty of diagnosing educational handicaps. *In some cases neurological defects can have striking effects:*
>
> (a) Sherwin is a slight, handsome, twelve-year-old boy. He is naturally quiet and introverted, so no one realized he was several years behind in reading skills until an alert teacher of educationally handicapped (EH) children noticed him. Though Sherwin has been in a gifted class, attends summer institutes in entomology at a nearby college, can easily read words like 'astronomy' and 'exploration' and quickly tabbed me (correctly) as a sociologist, he cannot read words like 'but', 'and' or 'in' because he has a perceptual handicap that causes him not to see letters. He can fill in the blanks when he reads 'astronomy' but short words become alphabet soup, so he has never progressed beyond the second-grade level in reading achievement and has come to hate school.
>
> (b) Lars is a twelve-year-old boy who is extremely talkative and who looks precocious and intellectual with his floppy hair and dark-rimmed glasses. He gives anyone who will listen minute descriptions of how he will do each activity, what problems he foresees and how he will overcome them. He is obviously bright but is terribly overactive. While he has some perceptual problems, his main learning difficulty is that he cannot sit in one spot long enough to do school work and is so hyperactive that he cannot be easily maintained in a regular class.
>
> (c) Erik, a ten-year-old boy, is Lars' opposite. He has been extremely quiet since he came to school, completely immersed in himself. It is hard to tell what his capabilities are or what the source of his behaviour is. Teachers speculated that he was autistic during a school year in which he did not say a word. Much of his difficulty seems to stem from a chaotic and traumatic home life. Before his mute year in school he came home one day to find his mother's boy-friend dead in bed of an overdose of drugs. It took that year for him to begin to get over the shock. But he still often cannot remember his teacher's name and withdraws into a fantasy world as a teacher sits to read with him, only guessing at words and rarely reading.
>
> The list could be extended considerably. In each case, children with apparently normal or superior capabilities are blocked by fairly specific incapacities.
>
> *Neurological problems are not always as clear as these* I have mentioned . . .
>
> (Milofsky, 1974, p. 440; our italics)

2.81 You may be used to thinking of sociologists as explaining individual actions in terms of broad social forces. Carl Milofsky belies his trade and attempts to squash diverse biographies into a package labelled 'neurological defect'. He does this even though he 'knows' that Erik had witnessed 'his mother's boy-friend dead in bed of an overdose of drugs' and that 'much of his difficulty seems to stem from a chaotic and traumatic home life'. You may find it strange to discover the lengths to which some people are willing to go for the sake of a cherished theory.

2.82 My second example comes from a summary by Lawrence, Steed and Young (1977) of teachers' accounts of the causes of disruption in one secondary school.

> *What causes disruption?*
>
> Four categories of cause seem to be used by teachers:
>
> (1) psychological explanations
> (2) the teacher
> (3) the ethos of education
> (4) physical conditions such as buildings.
>
> (1) Psychological. Disruptive children are 'isolated cases . . . boys with severe emotional disturbances . . .' 'aggressive personalities coming within striking distance of each other', 'emotionally disturbed children'.
>
> (2) Teachers. Teachers appear to contribute to the level of disruption 'by not containing children in the right way . . .' by '. . . their failure to establish in each class a normal, reasonable pattern of behaviour before they teach a topic . . .' by 'not quelling trouble makers quickly enough . . . for fear of losing good relationships or by too much discipline which provokes the emotionally disturbed child . . .' by 'inadequate preparation' and by 'negative expectations'.
>
> (3) Much disruption is created because of the 'type of discipline and method of enforcement', supporting a general ethos which boys are out of sympathy with. The school is an 'examination factory,' which offers 'literacy, numeracy and timekeeping', qualities not directly related or relevant to the jobs boys will go into but claimed by the school as gateways to success. Boys with learning difficulties are alienated by academic values . . . the school caters for a clientele which has disappeared and looks back to the standards of the good old days . . . it holds fast to the belief that 'if only children would dress correctly and open doors for each other and us all would be well . . . there is a refusal to face up to a vastly changed situation . . .' The result is that many children are bored—disruption takes the form of talking in lessons, constant niggling over a long period of time which it is difficult to do anything about. For many even the CSE is beyond them . . . there is no really suitable curriculum for the less able—for those who find a gap between the values of school and outside . . . much disruption comes from pupils who don't identify with the overriding exam emphasis and who find little else as an alternative. Many children are disillusioned . . . they find the exam emphasis beyond them. Too much 'interest', 'activity' in the junior schools.
>
> (4) The buildings. Space influences the incidence of disruption—'lack of space and relaxing activities . . . cramped conditions and a girls' school on the same site . . . the buildings are not ideal; corridors and doors are too narrow; there is a lack of an on-site playing field . . . cramped conditions in the playground . . . too many types of problem in a cramped environment . . .'
>
> (Lawrence, Steed and Young, 1977, pp. 53–4)

2.83 The teachers' accounts exhibit an awareness of a variety of possible factors contributing to 'disruption'. The causes and consequences of handicap will be a major theme of many units, in particular Units 11, 12, 13 and 14. As the course develops there will be an opportunity to explore factors which originate beyond the confines of schools and classrooms. The economic and political structures, as well as the cultural values and practices, of our society permeate our social institutions to manipulate and facilitate our day to day lives.

Summary

2.84 I have used the first two sections to provide an introduction to 'special education'. But special education is a vast area, and its investigation leads one into all the issues which affect the education system as a whole. I have looked at the kinds of children who become candidates for 'special provision', as well as those whose special needs we *ought* to recognize and do something to alleviate. In the next section I will take up a theme which pervades all our thought about special education: the integration of children with special needs.

3 *Integrating children with special needs*

3.1 In the last section I looked at the kinds of children who end up in special education. Underlying this survey was a hidden assumption. Some children do not fit in or make the grade in normal schools and are directed along a continuum of decreasing contact with the educational and social life of their schools, until they finally lose contact and enter segregated special schooling. In this section I want to examine the opposite possibility. What do we need to consider if we are to retain as many children as possible in ordinary schools? The integration of children with special needs is a major theme of this course, which you will have gathered from the case studies and the emphasis of this unit. This 'integration issue' has generated a considerable amount of debate, often characterized by strong emotion and deep confusion. It is an issue which concerns people's jobs, people's children, and the relationship which we should have with those who are handicapped and deformed and sometimes helpless. We might expect that such a combination of concerns should give rise to fears and anger which may themselves conceal deeper feelings of anxiety and prejudice.

3.2 Providing an education for some children in a special place—a remedial class or a disruptive unit or a special school—is one of the major ways in which some children with special needs are given a special biography. In studying the issue of integration we have to ask whether such placements of children are the rational consequence of their handicap, or a historical legacy, based on attitudes and values which we should now reject.

3.3 In this section I will try to set out and clarify some of the main strands of this issue, and introduce you to a range of concerns which will be expanded throughout the course. I will examine the definitions of integration in the context of a continuum of educational provision. I will draw a major distinction between the notion that integration is a good thing *in principle* and the *practical difficulties* that have to be surmounted if it is to be realized. In the reader article attached to this unit (Reading 5.1) I have examined trends in provision for handicapped children, the reasons underlying these trends, and examined some of the factors affecting the future course of events.

3.4 I see this section as very much an introduction to ideas which will be elaborated throughout the course and brought to a more practical conclusion at its end.

The integration principle

3.5 The 1980 government White Paper on special education needs specifies and supports a principle of integration which echoes the sentiments of government documents since the mid-fifties. The principle can be stated as follows:

> ***Whenever it is educationally and economically viable children with special educational needs should be educated in ordinary schools alongside children without such needs.***

This principle is the outcome of a chain of reasoning for the fullest joint participation of all children in the educational and social life of their schools. It presumes that the presence of special educational needs in children is not a sufficient reason for their separation from others. It asserts that children with special needs should be separated from others only if the means cannot be constructed for their continuing education in ordinary classrooms and ordinary schools.

3.6 You will have to assess the justification for the principle as you progress through the course, and you may come to the conclusion either that you do not agree with it or that you would qualify it in certain respects. You may believe that it is better for a whole variety of groups to receive a separate and distinct education. You may think that deaf children, for example, are better off educated only in association with other deaf children where they can gain a sense of deaf community. You may hold very different views for different forms of handicap or educational problems. You might wish to see the physically handicapped given access to normal schools while seeing no possibility for the inclusion

of the severely mentally handicapped. You might believe that all troublemakers in schools should be 'incarcerated' in special classes or special schools.

3.7 You may support an interpretation of the integration principle which advocates separate special education as the means to eventual integration in society, so that during a period of separate special education children develop the skills and capacities which will fit them for a future life in the community. But could any long-term segregation fulfil this function unless we interpret the notion of integration into the community in a very restricted sense? In the USSR, for example, special education is provided, to a great extent, in residential schools with a heavy emphasis in the curriculum on vocational training. Integration may be interpreted there as not directly benefiting the individual, but as making a contribution to production.

3.8 However, if you do adopt the ideal of integration and argue that the coeducation of handicapped and non-handicapped children is a good thing *in principle* then you are left with a simplified task. For adoption of the integration principle commits you to a desire for integration in practice. Your task then takes the form: how can we overcome the practical problems that arise in integrating children with special needs?

Defining integration

3.9 Let us be more precise. I find it helpful to bear in mind the three groups of children I identified previously. In section 1, I spoke of:

(a) the two per cent of children conventionally categorized as handicapped or identified as having severe educational problems;

(b) the 15–20 per cent children thought to have broadly similar but less severe problems;

(c) the indeterminate number of children who have needs, interests, and capacities to which schools do not respond.

Integration can be defined for each of these groups as:

> ***A process of increasing participation in the educational and social life of ordinary schools.***

For many of the children in the first group the process of integration implies a change of place. For children in the second two groups, integration necessitates a closer matching of children and curricula and school organization, aided by additional resources.

3.10 In looking at the meaning of integration for these three groups, we also have to bear in mind a fourth group: the children who are at present educated in normal schools in isolation from handicapped children. If the 'principle of integration' applies to handicapped children, then it must also be desirable and beneficial for non-handicapped children to be educated in close contact with the handicapped.

3.11 My definition of integration, then, applies to all children. Most children could participate to a greater extent in the educational and social life of their schools. The advent of comprehensive education provided an opportunity for the joint participation of children who had previously been separated in the selective secondary system. However, a change of place could not guarantee that children previously sent to secondary modern schools would mix socially with former grammar school children, or identify equally with the aspirations and activities of the school. Similarly a change of place for a physically handicapped pupil from a special school to an ordinary school provides an opportunity but no guarantee of participation in ordinary school life.

3.12 I have also defined the term integration so that it implies an educational change. Integration occurs when a child's participation in an ordinary school increases. Some people have defined integration as a state rather than a process. Thus the authors of the Warnock Report made three broad distinctions, between locational, social, and functional integration. In the first category, where handicapped children are on the same educational site as the non-handicapped, there may be no actual contact between the two groups. The second category implies some degree of social interaction, while the third implies complete joint participation in school life. In thinking of integration as a process there is only one category—the change for a child to a position of greater participation in school life.

The continuum of provision

3.13 In seeing integration as a process or trend we must have a picture of the range of options open to children. Cope and Anderson (1977) have indicated the continuum of educational provision available to physically handicapped children and I have adapted their chart in Table 12.

Table 12 Range of educational provision available to physically handicapped pupils.

Suitable for individual physically handicapped children in their local schools.	1 Ordinary class, no special help. 2 Ordinary class and ancillary help in care.
Suitable for groups of physically handicapped children placed in a selected (adapted or purpose-built) ordinary school in which ancillary help, speech therapy and physiotherapy is provided.	3 Ordinary class as base and additional teaching in a resource room. 4 Special class in ordinary school part-time, ordinary class part-time. 5 Special class full-time. 6 Day special school formally linked (e.g. same campus) to ordinary school. 7 Day special school, no such link. 8 Residential special school. 9 Hospital school.

Notes

(a) Provision of types 1 and 2 would imply that children would attend their local schools.

(b) Provision of types 3, 4, 5 imply a concentration of resources in particular selected schools, and hence children would not always attend their nearest school in these cases.

Source: adapted from Cope and Anderson, 1977, p. 20.

3.14 If the physically handicapped are to be integrated, the resources allocated to the present separate provision will, in future, have to be made available to them in other forms of provision. There will be an actual shift in numbers from special schools to ordinary schools, and hence the redeployment of special school staff into ordinary schools. Integration does not involve the crass proposal that all handicapped children should be placed in ordinary classrooms without additional help. For special education is not confined to a particular place, but involves the meeting of children's needs and interests irrespective of place. *The particular category of provision appropriate to an individual child should be determined by the optimum level of support required to enable the maximum degree of participation in school life.* At the moment some children are placed in schools for the physically handicapped because of a mild physical deformity who could manage perfectly well in an ordinary classroom and need no more individual attention than other children. However, many children will need the facilities of a resource room or a classroom base and a specialist teacher for varying amounts of time, depending on their capacities and temperaments. Unit 5/6 examines the organization and curriculum for physically handicapped pupils in detail.

A different process for different groups

3.15 The range of provision differs for children with different handicaps or problems. In Table 13 I have presented the range of options for children who present problems of discipline and sometimes find their way into 'maladjusted' provision. You can contrast these with the continuum in Table 12.

3.16 As you see, the nature of discipline problems presents a different set of practical issues for initiating a process of integration, which highlights the different kinds of argument that are used in favour of integrating and segregating different groups of children. I mentioned earlier that arguments for integration can be understood both in terms of benefits to handicapped children and in terms of the advantage to the non-handicapped of growing up with all children, irrespective of their disability or vulnerability. For some groups of handicapped children, say the most profoundly handicapped, one might even argue that integration *primarily* benefited the non-handicapped. Equally, when a child

Table 13 Range of educational provision for children who present discipline problems.

1 Ordinary class, no special help.
2 Ordinary class with professional support from social workers, educational psychologists or child psychiatry departments.
3 Ordinary class part-time, special group in ordinary school part-time.
4 Ordinary class part-time, special group outside school (e.g. 'tutorial class') part-time.
5 Ordinary class part-time, special school part-time.
6 Full-time attendance in special class in ordinary school, e.g. 'sanctuary group'.
7 Full-time attendance in 'disruptive unit' away from normal school.
8 Suspension from school and home tuition.
9 Residential school.
10 Intermediate treatment (run by social services departments) with probation officer support.
11 Community homes with education (formerly approved schools, now run by social services).
12 Psychiatric hospital.

Note Where children who present discipline problems also become involved in court proceedings, their 'education' may cease to be the responsibility of education authorities, e.g. in 10 and 11.

is transferred from an ordinary to a special school because of 'disruptive behaviour', it is often because of a perceived disturbance to the education of other children and to the peace of mind of her teacher rather than for any personal benefit to the child concerned.

3.17 If one took, as a different subgroup of children who find their way into maladjusted provision, those who are withdrawn and depressed, then the continuum would differ once more.

Activity 1 How would you expect the continuum of available provision for severely mentally handicapped children or children with sensory problems to differ from the continuum of provision for the physically handicapped shown in Table 12?

Comment (a) The continuum of provision for severely mentally handicapped children is broadly similar to that for the physically handicapped. However, after nursery school it would be very unusual to find a mentally handicapped child in a class without special help (category 1 provision). A few are in ordinary classrooms with the support of welfare assistants (as in Old Fletton Primary School in Peterborough).

(b) Children with sensory problems, again, occupy a similar range of provision to the physically handicapped, but it would be extremely rare for them to be deemed to need the care of a hospital and hospital school unless they were also severely physically and/or mentally handicapped.

Reading Now read 'A continuum of integration' in Appendix 3, adapted from Chris Kiernan's report of the Haringey project (Kiernan, 1977). How does his definition of integration differ from that in the Warnock Report and from the one I have proposed?

Comment (a) Chris Kiernan's distinctions are much finer than the broad divisions of the Warnock Report. They range from inclusion within the same educational system to mutual and reciprocal play.

(b) In common with the Warnock Report, he treats integration as a final state rather than a trend along a continuum of provision. His view is that children are 'fully integrated' when they are full-time unsupported members of ordinary classes.

(c) In this unit I have defined a point of maximum or ideal integration which will often fall short of unsupported educational and social inclusion in a normal classroom.

(d) The final state of integration mentioned is one not attained by many children without identified special needs. Some children may actively choose a relatively isolated existence. Should we regard them as not fully integrated?

Reading Now read 'Demystifying integration', Reading 5.1 in the Reader.

Comment I attempted to cover a very wide area in the article and I had to give a relatively brief space to many important issues. The changing prevalence of physical handicap is an important topic which will be revisited in Units 11 and 14. The links that I made with changes in the education system as a whole were suggestive rather than exhaustive, and I hope you may be encouraged to take some of these ideas further in your own reading.

In large part, the article contains a story which is of necessity incomplete. Since I completed the article, the Education Bill which emanated from the White Paper has been presented to Parliament. It reproduces almost exactly, in its statements on integration, the formula which is recognizable in the 1976 Education Act and the White Paper. *The Guardian* greeted the Bill's publication by talking of the long-awaited bill to enable more handicapped children to attend ordinary schools, in marked contrast to the reception given to the White Paper by the *Daily Express*. It looks as if the newspapers reproduce their own prejudices without regard to the content of the documents on which they are commenting. But that would be unfair—for one of the main features of such legislative documents is that they are essentially ambiguous. The 'appropriate' interpretation is often gleaned from the additional comments of ministers and civil servants. In his speech to Parliament on the Bill, Mark Carlisle (then Secretary of State for Education) aligned himself with the approach of the Warnock Report on progress towards integration. He commended to members of Parliament 'that part of its report as a balanced and judicious discussion of this difficult issue. It is in the spirit of that consideration that we have formulated our legislation' (*Hansard*, 2 February 1981, p. 30). As I have indicated, and will show later, the Warnock Report is itself ambivalent and ambiguous on these matters.

Mark Carlisle also said that there were 'fewer children in special schools today than there were in 1978–9' (*Hansard*, 2 February 1981, p. 30). I have not seen any detailed figures for 1980 myself and whether this information reflects the overall drop in numbers of school-age children or a *new trend* it is impossible to say.

I am aware that by the time this material reaches you, the Bill will have been transformed into an Education Act and the government may well have issued a circular indicating to local authorities how they should interpret it. It is circulars rather than the acts themselves which often make the most dramatic impact on policy. Comprehensive education was ushered in by Circular 10/65, but it was not until 1976 that the circular was itself enshrined in law.

I am aware too, that by the time the course has been running for a couple of years, some of this material may appear to belong to history. The cuts are likely to have even greater effects than have been anticipated. A report issued in 1981 by Her Majesty's Inspectorate, on the effects of the cuts, documented the impact on remedial provision, and two of our case studies illustrate this in particular schools. We have had to revise the case studies while they were in preparation to take account of this (see Units 5/6 and 13). If remedial departments are actually abolished in secondary schools, the possibility of developing special needs departments for a wider group of children will be severely curtailed.

Some major issues

3.18 In the following pages I will review some of the major considerations in planning for integration. Some of these issues will be familiar from what you have read so far. You may be aware of others as a result of your own thoughts and experiences.

How far can integration go?

3.19 Table 12 represented the range of provision available for physically handicapped and mentally handicapped pupils. There is a strong tendency for the most severely handicapped children to occupy provision at the bottom end of this range. You might assume from this that day and residential special schools would have to be retained for

these children, and this is an assumption echoed in official documents. Both the Warnock Report and the 1976 White Paper envisaged a 'considerable' future for segregated special schools. The Warnock Report saw a need to retain them for three categories of children:

> ... We are entirely convinced that special schools will continue to be needed, particularly for the following three groups of children:
>
> (i) those with severe or complex physical, sensory or intellectual disabilities who require special facilities, teaching methods or expertise that it would be impracticable to provide in ordinary schools;
>
> (ii) those with severe emotional or behavioural disorders who have very great difficulty in forming relationships with others or whose behaviour is so extreme or unpredictable that it causes severe disruption in an ordinary school or inhibits the educational progress of other children;
>
> (iii) those with less severe disabilities, often in combination, who despite special help do not perform well in an ordinary school and are more likely to thrive in the more intimate communal and educational setting of a special school.
>
> (DES, 1978b, p. 96, para. 6.10)

The Warnock Report suggests, then, that it is largely the children with severe handicaps who will continue to require a special school education. But is it really impractical to educate many of the severely handicapped within ordinary schools? In the London borough of Bromley, for many years, there have been classes for mentally handicapped children aged three to eight years in ordinary primary schools. You will read about one of these classes in a case study in Unit 5/6. All mentally handicapped children are included within ordinary schools in Swadlincote in Derbyshire: a primary school has all the most profoundly mentally handicapped children aged three to sixteen who live at home in the area, as well as the slightly less severely handicapped up to eleven years. This last group move on to the special needs department at Pingle comprehensive school. Many profoundly deaf and blind children are taught within ordinary schools. Such cases are documented in the case studies as well as in research conducted by the National Foundation for Educational Research (Jamieson, Parlett and Pocklington, 1977; Hegarty and Pocklington, 1981).

3.20 Many children categorized as severely handicapped can be educated in ordinary schools with imaginative planning. Imagination, the ability to separate yourself from your immediate surroundings and project yourself into worlds of possibility, is a decisive faculty for considering educational change. Mary Warnock has herself emphasized this point:

> It seems to me that understanding things imaginatively is itself a deep source of pleasure and satisfaction. But it is also the only possible way to intelligent action. In order to see how things can or should be changed, it is necessary first to know what they *are*, even how they came to be as they are ...
> Imagination, then, is what enables one both to understand how things are, and to raise the questions 'Need they remain like this?', and 'How could they be different?'
>
> (Warnock, 1978, pp. 8–9)

3.21 These sentiments are particularly pertinent for thinking about profoundly handicapped children. There is a fear that if the more able of the children move from the schools for the severely subnormal, this will have a bad effect on staff morale as well as upon the schools' aims and goals. There are some indications that this is already happening in hospitals for the subnormal and their associated schools. Can we find a place within the ordinary education system for even the most profoundly handicapped?

3.22 The profoundly handicapped need to be treated with compassion, acceptance and understanding. We might not expect such sentiments to arise most easily in those who are themselves only slightly less handicapped. Several people have commented on the way the most profoundly mentally handicapped children, who occupy the 'special care' classes, are actually isolated within their own schools for the severely subnormal. One possible reorientation of schools for the severely subnormal might retain them as small schools with their groups of 'special care' children, but open them up for other children from the neighbourhood who would opt for a small school. This is only one of many possible options. Integration can be used as an opportunity to increase the flexibility of the education system.

3.23 Imagination and will also have to be exercised in bringing children out of subnormality hospitals and into the community. There is ample evidence to suggest that subnormality hospitals find it extremely difficult to provide a warm secure environment for vulnerable children. Where small homes have been established as an alternative to hospital care they have been by far preferable. One has to reassess, too, the role of boarding schools for the handicapped. While some families do regard boarding schools for their child as a part of their family culture or as a solution to a difficult parent-child relationships, should any child be sent away to boarding school solely because she happens to have a handicap? One case study in Unit 5/6 concerns a child educated in a boarding school for maladjusted children 60 miles from his home. How can he and his community learn to adjust to each other at that distance?

3.24 I have looked briefly at the possibilities for integrating the severely handicapped. With appropriate redirection of resources, the majority of them could be educated in ordinary schools, most economically in a school serving a limited area where there was some degree of concentration of resources and professional assistance, and which provided a joint resource base which was also of benefit to other children with special needs in the school. In 1976 Mary Warnock remarked in an interview reported in *The Times Educational Supplement*: 'People do not take on board the severely handicapped. It is grotesque to think they could all be educated in ordinary schools'. Do you think this statement is reasonable?

3.25 Now, if it is practical to integrate many of the severely handicapped children who are currently in special schools, what of special schools for the moderately subnormal and for children who present discipline problems and for unhappy and disturbed children? There are many examples of integration schemes for children categorized as ESN(M). In fact, there can be few educational justifications for retaining ESN(M) schools at all (see Galloway and Goodwin, 1979). They contain a group of children whose difficulties overlap precisely with those in ordinary schools. It must make educational and economic sense to devise schemes and redirect resources which are to the benefit of all such children in schools.

3.26 Galloway and Goodwin come to a similar conclusion about children attending schools for maladjusted children. But of all children in segregated schools, it is this group which people are most resistant to reintegrate in to ordinary schools. Many of the children attending disruptive units have already been suspended from school. Children often arrive at maladjusted school after relationships with a teacher or group of teachers have broken down.

3.27 The special problems with this group emerged during the debate on the 1981 Education Bill. Harry Greenway, MP, informed the House that 'If I had to live with a particular slogan it would be "integration; not separation",' and argued that all children with special needs except 'about one per cent could be handled in normal schools. Staff could not be expected to handle that one per cent, for one reason or another—undue violence, physical or verbal violence, and so on'. Whether that one per cent is an immutable fact of nature or a figure which can be avoided in some schools which are adept at meeting the needs and catering for the interests of all their children is open to argument. It is questionable too whether it is wise to place all such children together in the same school or even the same class group.

Activity 2 Look back briefly at the categories of children for whom the Warnock Report envisaged continued special schooling (para. 3.19). How many children are there in each category? Is there any indication that the total numbers involved would be less or greater than those currently in special schools?

Comment (a) No implications for change can be detected from these categories. The numbers of children remaining in special schools is left open to diverse interpretations. If the integration principle is accepted, then the burden of proof rests with those who advocate segregated special schooling for some children. We need to know which particular children are envisaged as occupying such schools and exactly why it is impractical to organize the necessary resources for them in ordinary schools.

(b) We will attempt to give a precise indication of the relative needs for such provision for different groups of children and hence initiate *a set of proposals for the reshaping of special provision*. These suggestions for an integrated system will be developed in the course and brought together and reviewed in Unit 16. All indications about future needs will remain ambiguous until we actually get down to specifying the extent of our different requirements.

Integration in secondary schools

3.28 Integration of the handicapped becomes progressively less common and appears more difficult to organize as children move through the educational system. The tolerance for differences in character and ability displayed at the best nurseries may be strained by the examination orientation and subject-teaching basis of the secondary school curriculum. Large school buildings may be difficult to negotiate for wheelchair-bound children, and the modifications required to permit them access may be more difficult to achieve. However, a few secondary schools have developed ways of organization which enable them to incorporate children with a wide range of handicaps. Several such schools cater for children designated as ESN(M) and others for the physically handicapped (see Unit 5/6) and blind (Case study 6) and deaf children as well. The presence of a resource and learning base for some children within such schools provides the organizational link required to maximize their participation in school life (see Case studies 46, 48 and 51). If policy makers sincerely wish to overcome the practical obstacles to integration then they can use such models as the basis for developments in their own areas.

Financing integration

3.29 Special schools receive more money than ordinary schools. There is no evidence to suggest that a reallocation of resources for teaching these children in ordinary schools would necessarily involve additional costs. The price of residential placement may be balanced against the provision of extra support with the ordinary school. The travel costs to special schools may be balanced by the dispersal of specialist services into units or groups within ordinary schools. It is true that some children in special schools are provided with costly equipment. Some of this is devoted to individuals, and some is shared. But it would be a mistake to picture special schools as brimming over with space-age gadgetry. The case studies and television and radio programmes should show you how much special equipment there is in special schools and how easily this might be transferred to ordinary schools.

3.30 Of course, many important educational innovations are limited by the level of overall educational expenditure, and will be further limited as budgets are further cut. But matching curricula and children often involves a new approach to education rather than additional money. Unfortunately the cuts have been administered in some ordinary schools by reducing the numbers of remedial teachers and this really does erode the base to which more children with special needs might be attached. It appears from the 1981 Education Bill that there will be some measure of protection for the resources given to the two per cent of children conventionally regarded as handicapped. For integration to proceed effectively there needs to be an equal measure of protection for all the support given to children with special needs in ordinary schools.

Planned integration

3.31 No serious proponent of the integration principle advocates the unsupported dumping of children from special schools without careful preparation and support, and consideration of the form that new provision in ordinary schools should take. Where ordinary schools are involved with new groups of handicapped children, the mutual participation and interaction between groups of children will have to be fostered initially over a lengthy period by informed and prepared teachers.

3.32 The first step for implementing integration within any one LEA would be the development of a comprehensive plan setting out the existing provision and the stages and time-scale in which a new orientation would be achieved. No one should look for over-rapid change, but neither should change be so slow that the result is purely the product of 'market forces'.

3.33 Some schools are under stress not only from financial cuts but also because of high staff turnover, poor direction and delegation from the head teacher, and distrust and hostility between staff and pupils. It might be a mistake to attempt to incorporate new groups of handicapped children into such a school, though one teacher to whom I spoke argued for a 'basic studies centre' as the means through which his run-down comprehensive might be revitalized. Such schools also have special needs which ought not to be ignored. But it would usually be wise to introduce a new resource base for children with special needs into a school already able and willing to accept it.

Special education and the family

3.34 The next unit looks at the impact of handicap on the family. Children who attend special schools often mix with their 'normal' brothers and sisters at home and are integrated into family activities. It may come as a considerable additional burden for parents to have their children passing through separate schools, often involving considerable journeys in opposite directions. Many families of handicapped children are very content with the placement of their children in special schools. But this may be at the conclusion of a long period of stress about their child's handicap and resistance to special school placement. It is difficult to assess how many such parents would feel if they had the choice of sending their child to an appropriately supported ordinary school. Support from families for the categorization of their child as educationally subnormal (moderate) or as maladjusted is more rare and local authority officials often resort to considerable persuasion to obtain parental consent in such cases (see Sally Tomlinson's article, Reading 4.3 in the Reader).

Children grow up

3.35 In thinking about children at home and at school we have to try to make sense of their lives as a whole, and to do this we must also be aware of their possible futures. While it may be possible to create a happy segregated community in a residential school for the deaf, such children may be ill-prepared for communicating with the non-deaf when they leave school. It is equally crucial that the non-handicapped should learn how to interact with deaf and blind people and the severely mentally handicapped. The most obvious and natural place for the development of such communication is in school. Some special schools run 'social skills' courses for school leavers. During such courses the handicapped are meant to absorb the techniques for dealing with the 'outside' world. But the need for such courses is a consequence of the division of the handicapped and non-handicapped groups into separate cultures in the first place.

3.36 In developing the education of handicapped children, provision for them as adults may often be ignored. The constant physiotherapy which is provided for some very severely physically handicapped children and gives their limbs some mobility may simply be terminated when they leave schools, and their limbs may become rigid.

3.37 It may be that moving towards the coeducation of handicapped and non-handicapped children may facilitate the process of integration for handicapped adults. The people who devise policies for adults have generally grown up in isolation from handicapped people and may be insensitive to their needs and harbour deep feelings of unease or even prejudice against them. The 'powers that be' have erected a two-storey segregated hostel for handicapped students at Southampton University where physically handicapped students are expected to occupy the ground floor and blind students the first floor. By organizing the accommodation in this way it was felt that there would be no need for lifts! These same people might feel and act differently if the whole range of children had been part of their normal school environment. On reading this example

one person remarked 'I must be insensitive but this seems to make quite good sense to me. Lifts have been known to break down.' Is that your reaction?

3.38 For most severely handicapped people who need the continued assistance of others in order to cope in society, the only alternative to their family, once they leave school, is a large impersonal isolated residential institution. Many handicapped people dread the thought of a life in such a place. Ann West, in Case study 10, said that she would rather die than enter a home for the physically handicapped. That would have been her future if she had outlived her mother. She died in 1980. In unguarded moments the parents of severely handicapped children have voiced similar fears. One parent had this to say of his view of the future of his son and the attitude he attributes to others in his position.

> We'd all like to see our children die before we do . . . it's a terrible thing to say but seventy-five percent of us, if not more, would say this. Have you been to [he names a well known hospital for the mentally retarded]? They might do their best for them, but it's not good enough. No I'm not asking to have them done away with, but I just hope they die early from natural causes.
>
> (Fox, 1974, p. 53)

Perhaps this quotation shocks you. How could the provision for the handicapped be changed so that such views need not arise? Some areas of the country are beginning to develop small-scale assisted housing as an alternative to large 'homes' or 'hospitals' for the handicapped. There is some movement too towards the provision of alternatives to the family for young, handicapped people, so that alternative care does not coincide with the death, chronic illness or disability of parents. One case study associated with Unit 3 represents an attempt by a head teacher to discover just how much assistance might be required by the school leavers from his ESN(S) school if they were to live away from their families. However, the emergence of such policies is painfully slow.

Policies and choice

3.39 Change sometimes occurs through an agreement between all concerned, and in such cases little discomfort or anger results. It is more typical, however, for people to have different and strongly held views on any issue of social and educational policy, according to their vantage points and special concerns. The adoption of a particular course of action must inevitably override some of these views.

3.40 A change in policy towards the handicapped may involve a genuine *increase* in the number of options open to them. But with finite resources the opening up of resource bases for handicapped children in ordinary schools implies redirecting funds away from special schools. This change of policy would present *different* options for parents.

3.41 Sometimes the implementation of a new educational policy can involve a temporary disruption to the lives of children, parents and teachers. Considerable apprehension may greet the threatened closure of a thriving special school, as the case study for Unit 16 illustrates. The parents of children at an ESN(M) school in Oxfordshire protested about its threatened closure, and it was reprieved after the personal intervention of Mary Warnock. Whether a disturbance in the education of children is justified or not depends on the nature of any long-lasting benefits which follow the change.

The importance of the two per cent

3.42 The integration of the two per cent may fundamentally change the way we regard *all* children with special needs. For the two per cent of segregated children are often viewed as having problems which cannot be accommodated in normal schools. It is the schools which are 'normal', and these children have characteristics with which 'normal' schools cannot cope. We have seen how this notion is extended to a so-called broad view of special education by asking how many other children have similar though less severe problems. Researchers and teachers have estimated that 15–20 per cent of the school population have special needs. The present special educational system encourages educators

to perceive educational problems as emanating from the child and to see the solution to such problems in the form of special provision. Special provision may take the form of professional assessment and advice, remedial class or disruptive unit support but the amount of such provision always falls far short of the estimated demand.

3.43 But can the special needs of children be met while we expect schools to provide a 'normal' curriculum and then count the number of abnormal children who fail to cope with it? Perhaps instead all schools need to re-examine their curricula, their flexibility and the effects of an organization which may be designed to meet the needs and interests of teachers and administrators as much or more than their students'. The integration of the handicapped may give impetus to such a process, for it is blatantly impossible for some of them to be expected to conform to the educational and social norms of other pupils.

3.44 Schools always do contain pupils with diverse needs and interests, but there is sometimes an almost laughable effort to have them all behaving in the same way. One of the most illuminating phrases I heard from some head teachers was, 'If I let her do it they would all want to,' when a request was made for a flexible approach to an individual child. It is illuminating because it actually suggests that those teachers saw education as a constant battle against the inclinations of their children. It reached its greatest height of absurdity in one case where children were heavily punished when they returned from school after truanting. 'If I let him get away with it they'd all do it,' was the head master's justification. But strange as it may seem most children actually wanted to attend his school.

3.45 The existence of segregated special schools has a particular effect on the professionals who act as educational gatekeepers between normal and special education. This role is primarily occupied by educational psychologists at present. Their job can be seen, partly, as intervening and assisting in a process of moving children through the categories of special provision towards segregated special schooling. A commitment to integration would involve them in the reverse process. It would be the role of a normal school to ask of any child, 'How can our school be adapted to meet this child's needs and interests?', and the job of educational psychologists to assist such schools in providing an answer. (The possibilities for new professional roles will be explored in Units 7 and 16.)

Understanding children's lives as a whole

3.46 One way of conveying the spirit of this section is to consider an alternative, important meaning which can be given to the word integration. 'To integrate' means 'to put together'. We can talk of integration as denoting *the attempt to understand a child's life as a whole*. The education of children with special needs has to take account of their lives at home as well as at school and of their future when they leave school. Edna Varty, a head teacher at a boarding school for the physically handicapped, drew attention to this aspect of special education in an article entitled 'What about the integrated child?':

> . . . 'You name them and I've got them' (the child might say), 'I've got a speech therapist, a physiotherapist, an occupational therapist, a teacher and a houseparent. Don't forget the chap with the hammer, the other one who is always asking me to draw a man and the goon who likes me to close my eyes and put my finger on my nose. Then there's the head and matron, and as for mum and dad, well, they don't agree with any of them'. . .
>
> At the moment integration is an 'in' word. We hear of 'integrating the team', 'integrating the handicapped into normal schools', 'integrating into society', but what about integrating the child?
>
> (Varty, 1973, p. 24)

If we integrate the child, where do we educate her?

Reading Now read 'William: a child with Down's Syndrome' (Case study 3), and then '"I never felt I had to try." Recollections of a woman who had childhood rheumatoid arthritis' (Case study 10).

Comment on Case study 3

(a) In a family of six children, William has always been integrated into the activities of his brothers and sisters, yet was expected at school to associate only with children considered to be handicapped.

(b) His parents remarked on William's development of 'a special school persona' which emphasized his difference from other children.

(c) His parents' own wish was for William to attend a normal school but they were particularly concerned about his placement in an ESN(S) school. This was puzzling for them, as William's ability level should have placed him within the ESN(M) category. The rationale for local policies was never made clear to them. One factor was that their local ESN(M) school didn't want to include children who 'looked' handicapped.

(d) The Sullivans, like other parents, remark on their treatment by professionals in an impersonal and sometimes inhuman way.

(e) In achieving a different form of education for their child, the Sullivans received no professional assistance. In fact their view was regarded as impractical and unreasonable.

Comment on Case study 10

(a) Ann's experiences illustrate the changing scene of handicaps. In the early 'fifties many of the "physically handicapped" children had had polio'—a disease now virtually extinct in this country. Ann was sent away to a residential school, but a local school might be more possible now. Spa treatment was a recognized therapy for rheumatic complaints.

(b) She was caught up in a set of procedures which were governed by a point of view other than her own. No one stopped to consider her needs or abilities. She received a very inferior form of education and her aspirations remained very limited. Even the surgery she received stemmed from a generalized view of physical disability; Ann was given no part in the decisions taken about her own body.

(c) Despite her severe disability and potential isolation, Ann has been involved and interested in the events of the world and has made and maintained lasting friendships.

(d) Ann has never considered paid employment as a real possibility for herself, though she did make some money from her painting. Nevertheless her days have been productively filled.

(e) For many years her life had a precarious future. Her health was deteriorating and her mother was growing old. She shrank from the possibility of a residential 'home'. She died while her mother was still active and healthy.

Reading

I have included two documents in the appendices. Appendix 4 is the educational recommendations of the Snowdon working party, 'Integrating the disabled'. Appendix 5 was produced by the National Council for Special Education, which represents the interests of some special school teachers. As you will see, the documents take rather different positions. I suggest you read them and consider them in relation to your own views on the integration of handicapped children in ordinary schools.

4 *How to decide?*

4.1 In the final section of this unit I have set down some thoughts in an attempt to help you make up your minds about the issues we are covering in this course. I hope you will approach these and everything else you read with critical awareness. Books and articles can contain really foolish statements and may often consist of little else. At their worst texts in education and the social sciences dress up everyday knowledge as if it were the result of careful 'scientific' investigation. My favourite example of the moment comes from Darling (1979) *Families Against Society*. She quotes the following research study: 'Meyerowitz and Kaplan (1967) found greater stress in families that had two or more children with cystic fibrosis' (Darling, 1979, p. 50). Do we need 'researchers' to tell us that it is more stressful to have two chronically sick children than one?

4.2 It can be difficult to give one's own personal assessment of printed texts. The printed word stares at one authoritatively from the page, and it is often easier when faced with a passage that doesn't appear to make sense to assume that it is one's limited understanding which is the culprit. The business of criticism is complicated because there are two very different ways in which a text can make sense. It may contain a carefully reasoned argument which connects premises closely with conclusions. That is the only truly legitimate way to assess a line of reasoning. However, people often regard a passage as sensible if it contains a familiar sentiment. It makes sense because it echoes the views one is used to seeing. Any subject which has been talked and written about over a number of years incorporates a large number of assumptions. These become such a familiar part of writings and discussions that they are rarely scrutinized and questioned. They become part of the 'logic' of the discipline. But if it is their familiarity rather than their truth which makes them acceptable, then they may contribute to a corrupt 'logic'. In this course we will sometimes be challenging received opinion and we hope we will not fall prey to the converse of this loose logic. For arguments may be rejected, not because their chain of reasoning is flawed, but simply because they contain unfamiliar statements.

4.3 In my analysis of trends in integration, I offered an explanation of public statements as being a reproduction of received, unquestioned wisdom. Let me give a further example of the use of familiar phrases to convey an impression of logic. In *People Not Patients*, Peter Mittler presented the following argument, the beginning of which I quoted in my reader article.

> The question of whether mentally handicapped pupils should be taught in special or ordinary schools should be seen as one of reconciling the child's educational and learning needs with the need to maintain contact with ordinary children in the community. But in our concern to avoid isolation of handicapped children from their peers, we should not lose sight of the evidence from research that mentally handicapped children do not automatically benefit merely from exposure to a rich and stimulating environment, to the challenge of normal children and normal experiences, and to the presence of well-intentioned but inexperienced staff. The education of mentally handicapped children demands the highest level of training, competence and skill.
>
> (Mittler, 1979, p. 101)

In the opening sentence of this paragraph we are asked to contrast the educational benefits of special schools with the social benefits of a less segregated setting. While this is a common suggestion, it establishes a false premise. After all, why should a properly resourced and staffed base in an ordinary school provide handicapped children with an inferior education? The next sentence seems to imply that if mentally handicapped children were in ordinary schools they might be exposed to 'well-intentioned but inexperienced staff'. It is just as feasible to appoint trained staff to work with mentally handicapped children in an ordinary school as it is in a special school. But could something else be implied by the sentence? Is it being suggested that mentally handicapped children could be benefited only by coming into contact with people with the appropriate diploma? Their parents and family and friends might not qualify on that count.

4.4 I am not suggesting that it is possible to go into this sort of detail to understand everything one reads or all one thinks and writes for oneself. In attempting to be truthful about special education one has to find the right balance between building an argument and checking on its foundations. It would be totally impractical to spend all of one's time holding up one's premises for scrutiny. Many a good person has disappeared in an introspective spiral chasing their own assumptions. In attempting to make sense of special education I have found it useful and interesting to search out inconsistencies in practices and provision and in the statements people make about them. This is the method beloved of PC Plod, a 'hello, hello, hello, what's going on here?' applied to special education. It is the unusual or apparently inexplicable event or the contradictory action or statement which often supplies the clue to what's really going on. The woman who claims to experience no feelings of racial prejudice is betrayed when she attempts to interrupt her son's association with a black girl. A politician's advocacy of nationalization may be seen as an unprincipled means of earning a living when one discovers his speculation on the stock and land markets.

Contradictions in special education

4.5 People may display inconsistencies or contradictions by what they say and write; they also show them in what they do. I have mentioned several such puzzles in the course of this unit. I have gathered together a few further examples of 'special contradictions' from my own experience which I have found useful in trying to understand what is going on in special education. I present them here in the hope that you may be able to make use of a similar method.

(a) I was discussing education with a head teacher of an ESN(S) school. She had previously worked as a teacher in charge of a unit for similar children in an ordinary school. When I asked her how she had felt about the unit she told me that it had been thoroughly successful. The children had learnt well and were socially integrated to some extent. However, she was now advocating that such children from the age of three years be included in her school, and had become an opponent of plans to integrate such children in other normal schools.

(b) In one local authority, all the deaf and partially hearing children are placed in units in ordinary schools, yet most of the blind children are sent away to special residential schools. The cost per year of sending each child away to such a school is more than a teacher's salary.

(c) It is common practice in this country to place children with Down's Syndrome in schools for the *severely* subnormal irrespective of their ability. Such children exhibit considerable variation in ability and may perform 'within the normal range'. Why should this group receive this particular treatment?

(d) I attended a lunchtime meeting one day at a school for 'maladjusted' children. The headmistress, who claimed not to use any form of physical restraint on the children, was constantly accompanied by a large alsatian. The staff and children sat round the hall walls with the intention of discussing issues that had arisen in the school during the previous week. One child sat staring intently at a member of staff and punctuated the proceedings every ten seconds with the cry, 'You cunt!' I felt an atmosphere of tension, and marvelled at the composure of the staff. In the staff room afterwards a different staff member asked why I had come to the school. 'Oh, I've just come to talk over a couple of problems with you', I said. 'Well, you can fuck off for a start!' was his response.

(e) Calling a child maladjusted implies that the child does not adjust to a particular environment. Some people argue that identifying a child as maladjusted does not imply a negative evaluation or stigma: it's just that she can't cope well with a particular school or family. Why don't we apply the term 'maladjusted' to the school and teachers of such a child if it's just that they can't cope well with a particular pupil?

(f) The advocates of comprehensive schooling did not include handicapped children and children in special schools in their plans. Why should they have been omitted?

(g) Children who are categorized as ESN(M) require a curriculum which is similar to that of large numbers of children in ordinary schools. Yet they have been one of the fastest growing groups catered for in segregated special schools. Why should this be so?

(h) How could we relate provision to the needs of children if we know in advance how much (or how little) we have to spend?

Ideologies

4.6 Of the practices I have mentioned above, very few if any can be explained by the peculiarities or propensities of one person. When inconsistencies, misunderstandings and self-deceptions are shared among groups of people, we suspect that a process is occurring which has a more general cause than the personal unconscious. 'A shared set of assumptions which systematically distort what is really going on' is one definition of the word 'ideology'. I have examined the view that the integration of the handicapped is a process which has already gathered considerable momentum. While this view is frequently repeated, it seems to have little basis in fact. One might call this view an ideology. When such a view is repeated by many different people in circumstances which ought to lead them to discover their error, then one begins to suspect that the view is held for deep-

seated reasons. Often the deep-seated reasons which ideologies appear to serve can be described very simply. They are ways in which people attempt to preserve their world from change. If one insists that integration is occurring although the reverse continues to operate, then one can give the illusion of change while conserving the status quo.

4.7 I have drawn your attention to another view which is widely held but equally difficult to substantiate. It is often assumed that there is a clear distinction between children who are developing normally and those who are not. Children who are not normal do not make adequate progress when given normal opportunities. The official categories of handicap specifically refer to children who cannot follow 'the normal regime of ordinary schools' or the 'education normally given in ordinary schools'. Such definitions direct our attention away from the schools themselves and cause us to focus on the problems inside the children. For these reasons Golby and Gulliver, in the reading in Unit 5/6 (Reading 3.4), think of this view as the ideology that there's something wrong with the person and call it the 'ideology of pathology'. But what facilities should a 'normal' or 'adequate' or 'good' school contain? It should be clear, too, that different people may have totally different views of what is 'normal' or 'acceptable' or 'desirable' or 'stimulating' or 'uncontrollable' in children. There can be no consensus about what constitutes normality because 'normality' is defined according to a set of values. It cannot define the same people for all of us unless we are subject to a vast amount of efficient political control. It has this in common with other words like 'maturity' or 'need', which are often used without an explicit realization that they refer to the goals desired by a particular group of people.

4.8 A third view can be called the ideology that 'the person is the job'. People seem to believe that you can clearly specify the jobs that various 'professionals' perform in terms of some ideal job description which specifies the duties, skills, knowledge and capabilities of the employee and distinguish that particular job from all others. Teachers by definition are better teachers than parents, and educational psychologists are better at educational psychology than teachers. Social workers are, of course, more capable at social working than teachers, parents, and educational psychologists and, needless to say, doctors are the best at doctoring. But, of course, there is a fatal fallacy in this line of argument. For the skills, knowledge, and capacities which people possess are those they actually possess, not ones that go with the job. In actual practice there is considerable overlap in the repertoire of different groups of people and vast variations in the actions of members of the same group when they are performing the same job. The position is further complicated by the fact that there may be little relationship between the job people do and the training they receive.

4.9 Now, regarding the person or professional as somehow living out her job description is misleading in two important ways. First, it supports a more general notion that the careful sorting out of people into occupational slots as they progress through the educational system is a rational procedure. Secondly it leads us to think that we know what someone is up to once we know their job. In fact the guiding motives of any particular person will certainly extend beyond her role prescription. Whatever else she is doing, she will always be earning a living and may be attempting to win promotion by impressing her superiors or may be acting out a personally important set of deeply held beliefs which are irrelevant to the needs of others. All jobs are conducted by real people, each with their own peculiar biography.

4.10 It would be unwise to leave out of this brief discussion of ideologies a view which appears to underly the self-deception of virtually our whole society. You will all be familiar with the phrase 'equality of opportunity', and recognize it as the principle underlying many recent education changes. I can do no more than introduce the idea here but I do so because so much of special education is bound up with the idea of compensating for handicap or inequality. As I have mentioned, 'equality of opportunity' was a rationale behind both the moves towards selective education and the introduction of comprehensive schools. A notion that somehow every child should be given an unfettered opportunity might be described in practice by the following statement:

A Resources should be distributed in education to provide each child with an equal chance to achieve status and wealth in society.

One of the obvious implications of such a statement is that resources can be expended to remove a disadvantage or handicap possessed by a child, who will then be able to get

what she can out of society in fair competition. This implication may be false in two ways: the handicap may not be easily detachable and the competition may not be fair. But there is another possibly more important way in which any ideology of 'equality of opportunity' is a notion which can only obscure reality. For we can rephrase our statement and give it a different appearance.

B Resources should be expended to provide every child with an equal chance to live in poverty and squalor.

Is it really sensible to expend resources in an attempt to rearrange the positions of status and wealth in society without attempting to remove the excesses of poverty by redistributing wealth to provide a decent minimum level of income and living conditions for everyone? While the wealth of the nation was growing, this reshuffling process could be hidden by a general upward shift in material standards. It might really have seemed as if any 'upward mobility' did not have to be matched by someone else's misfortune. Without an overall redistribution of wealth the money expended on equality of opportunity is a cosmetic or face-saving procedure.

4.11 Many of the most basic questions concerning special education lead us to confront these political realities. Who are the children with special needs? What is the nature of their needs? How can they be met?

The scientific and the moral

4.12 In deriving a position on the desirability, form and extent of integration I suggested that your first step was to make a distinction between 'the integration principle' and practical considerations which are involved in its implementation. Deciding your position on 'the integration principle' is essentially a moral choice. Working out the practical considerations about implementation involves gathering information about possibilities and snags and the means by which these can be overcome.

4.13 However, there is a view pervading educational research which directs attention away from the important moral choices that are involved in policy making. On this view, the only considerations relevant to decisions about education are of a scientific rather than a moral nature. This is one strand of the 'ideology of positivism', a set of ideas developed in the nineteenth century concerning the reshaping of society according to scientific principles. This ideology is so pervasive that it can be quite difficult to gain acceptance for an alternative approach. But however hard you try, you cannot, in logic, derive a moral imperative from a statement about the 'scientific' facts of the case: you cannot produce an 'ought' from an 'is'; science cannot tell us how we *should* live. The existence of this 'gap' is rarely the subject of direct dispute, though this hasn't prevented people, in practice, from attempting to derive social and educational policy 'directly' from research evidence or perhaps, more commonly, resisting any change in policy until the evidence is forthcoming.

4.14 Discussions about the use of corporal punishment are sometimes waged by two groups, one side emphasizing that administering such punishment is an immoral social practice, while the other side argues for its retention on the 'factual' grounds that it reduces disruptiveness. But clearly there must be limits to the extent to which a practice can be defended on such grounds. For if eye-gouging were a contemporary punishment in schools, no one would advocate abolishing it on the grounds that research had found that it impaired children's reading ability. In advocating the retention, introduction, or abandoning of an educational practice, *both* moral and practical or 'scientific' considerations are relevant.

4.15 Some people have attempted to assess the relative merits of different ways of running classrooms or schools solely on the basis of which leads to higher educational attainments. But disputes about formal or informal teaching styles are as much to do with the kinds of relationships one wishes to see between children and adults, and about the extent to which it is desirable for children to take control and responsibility for their learning, as it is about educational efficiency.

4.16 When I looked at the evaluation of the unit for handicapped children which is the subject of a case study you will read in Unit 4, a 'professional' who had been involved with some of the children said, 'I know that handicapped children should be in ordinary schools but you've got to prove it. You've got to show that they reach a higher educational standard.' I felt that it would be quite wrong to look for such quantified benefits from the integration of handicapped children. Educational research is littered with the inconclusive findings of controlled studies. Control groups can really only be justified when the degree of control is greater than the possible sources of variation, and in education the variations in children, their families, their schools, teachers and curriculum are vast. And before such an 'experiment' was worth performing you would have to propose a rational hypothesis. But could it really be the case that educating a few children together in a unit in an ordinary school actually harmed their educational performance?

4.17 I am suggesting that you think of investigations in education as a two-stage process. The first involves reasoned argument about the way we want children to develop and about the kind of society we are attempting to reproduce through them. Then when we have applied our 'moral reasoning' to an issue and established our social priorities, then we can begin to examine the means by which our goals can be achieved. We can use research to answer two questions of *a different type:*

(a) Is it possible to achieve a desired educational change?
(b) How can our desired ends be realised?

4.18 The first of these new questions often involves research of a very limited scale. The variety of educational practices is so great, even within a small geographical area in the UK, that we can often point to working examples of the kinds of practices we wish to see. Although the integration of children designated as handicapped may not have occurred on a vast scale, there are a large number of scattered examples where such children have been incorporated successfully and happily into normal schools.

4.19 As you see, I am suggesting that a *single* case or limited number of cases may be sufficient proof of the feasibility of a particular educational arrangement. If schools in the most difficult areas of the inner cities of other European countries can function effectively without corporal punishment, then we do not need to repeat the 'experiment' in the UK. It is another feature of the ideology of 'positivism' that not only is all knowledge 'scientific' but it must also be shown to be generally true. I interviewed the researcher in charge of a project, funded for a limited period, to look at the effectiveness of providing an education for a group of mentally and linguistically handicapped children in an ordinary school. When he went into the project he confessed that he had viewed 'integration' with great suspicion, seeing it as something that might be foisted on unwilling schools by pressure groups. However, he said he was 'totally convinced' by the success of the project. But when I asked if he would therefore advocate the setting up of such units in other areas of the country, he replied, with caution, that he would first of all like to see a number of other 'experiments' like his own, carefully monitored by a multi-professional team.

4.20 It seems perfectly reasonable to suppose that if classes for mentally handicapped children in ordinary schools can be run effectively in a 'working-class' town in Derbyshire, a mixture of areas in Bromley and an inner-city area of Haringey, then they would work almost anywhere in the UK.

4.21 The belief that legitimate educational change awaits the production of scientific and general proof can act, then, as a powerful conservative force. Any suggestion for change can be deferred indefinitely. A particular example of this force in action is the tendency to call any departure from standard practice an experiment. In Wessex, for the last ten years, children have been catered for in houses as an alternative to living in large subnormality hospitals. This style of living continues to be referred to as 'the Wessex experiment'. But what could be experimental about living in a house? Treating others as individuals and showing them personal care and respect could only be regarded as 'experimental' in a society where people were willing to conceal their own responsibilities under the cover of 'scientific reasoning'. For what should we say of established practice itself? Has that been scientifically validated? Are subnormality hospitals and special schools experiments?

Appendix 1

The DES's categories of handicap

CATEGORIES OF HANDICAPPED PUPILS

ENGLAND AND WALES

1. The categories of pupils requiring special educational treatment in England and Wales are defined in the Handicapped Pupils and Special Schools Regulations 1959, as amended. The definitions are as follows:

"(a) blind pupils, that is to say, pupils who have no sight or whose sight is or is likely to become so defective that they require education by methods not involving the use of sight;

(b) partially sighted pupils, that is to say, pupils who by reason of defective vision cannot follow the normal regime of ordinary schools without detriment to their sight or to their educational development, but can be educated by special methods involving the use of sight;

(c) deaf pupils, that is to say, pupils with impaired hearing who require education by methods suitable for pupils with little or no naturally acquired speech or language;

(d) partially hearing pupils, that is to say, pupils with impaired hearing whose development of speech and language, even if retarded, is following a normal pattern, and who require for their education special arrangements or facilities though not necessarily all the educational methods used for deaf pupils;

(e) educationally sub-normal pupils, that is to say, pupils who, by reason of limited ability or other conditions resulting in educational retardation, require some specialised form of education wholly or partly in substitution for the education normally given in ordinary schools;

(f) epileptic pupils, that is to say, pupils who by reason of epilepsy cannot be educated under the normal regime of ordinary schools without detriment to themselves or other pupils;

(g) maladjusted pupils, that is to say, pupils who show evidence of emotional instability or psychological disturbance and require special educational treatment in order to effect their personal, social or educational readjustment;

(h) physically handicapped pupils, that is to say, pupils not suffering solely from a defect of sight or hearing who by reason of disease or crippling defect cannot, without detriment to their health or educational development, be satisfactorily educated under the normal regime of ordinary schools;

(i) pupils suffering from speech defect, that is to say, pupils who on account of defect or lack of speech not due to deafness require special educational treatment; and

(j) delicate pupils, that is to say, pupils not falling under any other category in this regulation, who by reason of impaired physical condition need a change of environment or cannot, without risk to their health or educational development, be educated under the normal regime of ordinary schools."

SCOTLAND

2. In Scotland the categories of pupils requiring special educational treatment are defined in the Special Educational Treatment (Scotland) Regulations, 1954 as follows:

"(1) deaf pupils, that is to say pupils who, because of defective hearing, are without naturally acquired speech or language;

(2) partially deaf pupils, that is to say pupils whose sense of hearing is defective but who possess naturally acquired speech or language;

(3) blind pupils, that is to say pupils who have no sense of sight or whose sense of sight is, or is likely to become, so defective as to be of no practical value for reading or writing;

(4) partially sighted pupils, that is to say pupils whose sense of sight is, or is likely to become, defective but is, and is likely to remain, of practical value for reading or writing;

(5) mentally handicapped pupils, that is to say pupils who have little natural ability;

(6) epileptic pupils, that is to say pupils who suffer from severe or frequent epileptic seizures or who, by reason of epilepsy, behave in such a way as to make it inexpedient that they should be associated with other children;

(7) pupils suffering from speech defect, that is to say pupils who suffer from defect or lack of speech not due to deafness or mental handicap;

(8) maladjusted pupils, that is to say pupils who suffer from emotional instability or psychological disturbance;

(9) physically handicapped pupils, that is to say pupils who suffer from a physical disability which is, or is likely to be, permanent or protracted and which does not bring them within any of the foregoing categories."

Appendix 2

Extract from the Warnock Report

III A NEW SYSTEM TO REPLACE CATEGORISATION

The present system of categorisation

3.21 It follows from what we have said about the different forms of special educational need that the particular form presented by an individual child is not necessarily determined by the nature of any disability or disorder suffered by him. Yet the principle of categorisation of handicapped pupils by type of disability or disorder has long been enshrined in education legislation in England and Wales and in Scotland. Moreover, it has exercised a powerful influence in practice on the ways in which assessment reports have been framed and educational provision has been organised.

3.22 It is generally accepted that in the early post-war years the list of statutory categories helped to focus attention on the existence and needs of different groups of handicapped children and offered a broad framework for planning special school provision which was generally found useful by local education authorities. There are some who believe that categorisation is still a valuable safeguard of the rights of a handicapped child to an education suited to his needs, They would probably accept that categories add nothing of substance to the existing general legal safeguards, such as those in Sections 8 and 34 of the Education Act 1944 (which require local education authorities in England and Wales "to secure that there shall be available for their area sufficient schools" and "to ascertain what children in their area require special educational treatment") and those in the equivalent Section of the Education (Scotland) Act 1945; but they argue that categories nevertheless underline the duties of local education authorities towards handicapped children. We return to this argument in paragraph 3.30.

3.23 These considerations have some force, but the use of statutory categories also has a number of disadvantages, as was pointed out by contributors to the written evidence, of whom a majority, although not an overwhelming one, favoured their abolition. First, their use pins a single label on each handicapped

child and each special school. Many children suffer from more than one disability and this can present intractable problems of classification, especially as the major disability from a medical point of view may not, as we have pointed out already, be the most significant educationally; it also means that a wide variety of schools is required, with some catering for combinations of disabilities. Moreover, labels tend to stick, and children diagnosed as ESN(M) or maladjusted can be stigmatised unnecessarily for the whole of their school careers and beyond. More important, categorisation promotes confusion between a child's disability and the form of special education he needs. The idea is encouraged that, say, every child with epilepsy or every maladjusted child requires the same kind of educational regime. The confusion is heightened by the fact that only two categories – blind and deaf pupils – are defined in terms of educational methods positively required, whereas the other categories are defined in terms of disability which makes the pupils unsuited to the normal regime of ordinary schools. Moreover, although most local education authorities provide special help for children who in their opinion need it, even if these children do not readily fit into any of the statutory categories, a strict construction of Section 33(1) of the 1944 Act, or in Scotland Section 62 of the Education (Scotland) Act 1962 as amended, would prevent a child from being regarded as handicapped unless he came within one of the categories defined in regulations. However carefully a scheme of categorisation of handicaps is drawn up, there are always likely to be some children in need of special educational provision who will be excluded because they do not fit into any of the categories.

3.24 Whatever the weight attached to the preceding arguments, we believe that the most important argument against categorisation is the most general one. Categorisation perpetuates the sharp distinction between two groups of children – the handicapped and the non-handicapped – and it is this distinction which we are determined, as far as possible, to eliminate.

3.25 Furthermore, categorisation focuses attention on only a small proportion of all those children who are likely to require some form of special educational provision. We believe that the basis for decisions about the type of educational provision that is required should be not a single label "handicapped" but rather a detailed description of special educational need. *We therefore recommend that statutory categorisation of handicapped pupils should be abolished.*

Future forms of description of children with special educational needs and of special schools

3.26 We recognise, however, that for the sake of convenience descriptive terms will be needed for particular groups of children who require special educational provision. While the continued use of the existing forms of description for children with physical or sensory disabilities seems acceptable, we consider that it would be preferable to move away from the term "educationally sub-normal" or in Scotland "mentally handicapped", terms which can unnecessarily stigmatise a child not only in school, but when he comes to seek employment. "Educationally sub-normal" is, in any case, open to criticism on the grounds that it is imprecise and assumes agreement on what is educationally normal with regard to ability and attainment. It also suggests that a child so described suffers from an intrinsic deficiency whereas often the deficiency has been in his social and cultural environment. *We recommend that the term "children with learning difficulties" should be used in future to describe both those children who are currently categorised as educationally sub-normal and those with educational difficulties who are often at present the concern of remedial services.* Learning difficulties might be described as "mild", "moderate" or "severe". Children with particular difficulties, such as specific reading difficulties, might be described as having "specific learning difficulties". It will be argued that the practical effect of our proposal will be only to replace one label by another. We believe, however, that the term we have proposed, which will be used for descriptive purposes and not for any purpose of categorisation, is preferable to the existing label because it gives more indication of the nature of the child's difficulties, and is less likely to stigmatise the child.

3.27 The term "maladjusted" is also open to objection on the grounds that it can stigmatise a child unnecessarily; in addition, it can be criticised on the grounds that the concept of maladjustment itself is such a relative one that the description is meaningless without details of the child's circumstances. Worst of all, it tends to suggest a permanent condition and fails to give any indication of the type of special educational provision required. However, although there is a good case for referring to children as having emotional or behavioural disorders, we think that the term "maladjusted" also remains a serviceable form of description and should be retained. Indeed, we consider that the implication of this term (namely that behaviour can sometimes be meaningfully considered only in relation to the circumstances in which it occurs) is an advantage rather than a disadvantage. This consideration in our opinion outweighs the possible harm of stigmatisation.

3.28 Our suggestions as to the form of description of children apply also to the description of special schools. We hope, however, that our recommendation in Chapter 6 that each local education authority should produce a handbook giving details of special educational provision in its area will mean that knowledge of the facilities offered by particular special schools will be so widespread that in practice it will be unnecessary to describe them in terms of the pupils for whom they cater. It is already common practice in many areas to refer to special schools by a simple title, without mention of a particular disability, and we hope that this practice will become universal.

Appendix 3

A continuum of integration

Adapted from Kiernan, 1977.

In discussing integration we have to specify what is meant by the term. Integration can clearly apply to activities in and outside school. Most children in special schools are integrated in the sense of living with normal siblings or meeting normal children out of school.

A series of questions with yes/no answers can be constructed to indicate a continuum of integration. If the answers to all 19 questions are 'yes' then full integration has been achieved.

1 Are the handicapped and non-handicapped in the same school system? Before 1971, the severely handicapped were 'educated' in junior training centres which were not part of the school system. After 1971, all children fall under the education system.

2 Do they have the same quality of teaching staff? Many junior training centre staff were either untrained or had training which was not appropriate to education. Currently, untrained teachers are becoming increasingly rare in schools, and in the [Haringey] project both staff were appropriately trained.

3 Are the children on the same school site? A class or school may be housed on the same campus as those for normal children but this does not ensure interaction between staff or children. However, being on the same campus may promote passive interaction.

4 Are the teachers responsible to the same administration? Are the handicapped children taught by a teacher who is an equal member of staff in a school for normal children? Is the teacher responsible to the head of the school as an equal member of staff or is he or she accountable to another authority?

5 Does the class occupy a classroom in the same building as normal children? If the answer to this is 'yes', the children will be more likely to have at least passive interaction with normal children and the staff teaching normal children.

6 Do the staff share staff rooms, attend staff meetings and bid for money on an equal basis with other staff? In the case of special school children in England and Wales there is an extra per annum allowance for the provision of equipment.

7 Do the children follow a similar curriculum for non-academic activities, e.g. assembly, milk times, play times, lunch times, and toileting? The fact that elements are common does *not* mean that they are shared.

8 Do the children follow a similar curriculum for academic activities (anything from sand and water play or sensori-motor coordination play, to number and reading)?

Note: the curriculum may be similar but not shared—though a common curriculum enhances the possibility for sharing.

Mixed groups for non-academic subjects

9 Are there mixed groups for non-academic activities? A mixed group contains non-handicapped and handicapped children and may occur at assembly, play, lunch or toilet times.

10 Are the mixed groups voluntarily joined, or are they arranged by the teacher, e.g. 'Joe, it's your job to look after Monica this playtime'?

11 Do the groups require little supervision (e.g. to eliminate domination or teasing)?

12 Is the handicapped child expected to do the same things as the non-handicapped? What degree of support is required, e.g. in going to the toilet, having lunch?

13 Is the handicapped child treated as a playmate? Or is the child used for convenience as a play object or do the children just play alongside each other?

Mixed groups for academic activities

14 Are there mixed groups for academic activities?

15 Are the mixed groups formed voluntarily?

16 Is there no special supervision?

17 Are handicapped or non-handicapped aiming for the same achievements? Or are activities modified for the handicapped?

18 Do the children work co-operatively? Or is the non-handicapped child the supervisor, or do they work in parallel?

Shared classroom

19 Does the handicapped child share a classroom all the time with the non-handicapped? Or are there brief withdrawal periods for special teaching, or is there only occasional sharing?

Appendix 4

The recommendations of the Snowdon Working Party

EDUCATION

1 A major object of special education policy over the next ten years should be the planned introduction of a system of integrated education for the handicapped, geared to meeting the needs of differently handicapped children and adults at all levels of education, beginning at the pre-school stage, and extending upwards from primary and secondary school to post-school facilities.

2 Suitable ordinary schools should be selected throughout the country and properly staffed, serviced and equipped to meet the needs of handicapped children.

3 The various forms of special provision lying between the special school on the one hand and the ordinary-school-with-no-extra-help on the other – the use of specialist consultants, peripatetic teachers, resource departments and special classes in ordinary schools – need to be greatly expanded to provide a range of special provision which does not exclude the possibility of special school placement but which is fundamentally integrated into the ordinary school system.

4 Peripatetic advisory services for hearing-impaired and visually-handicapped children in ordinary schools should be developed for other handicap groups.

5 In particular there needs to be a vigorous programme of establishing resource centres or departments in selected schools where groups of children suffering from a particular handicap can be given the specialised help they need to facilitate their integration into the ordinary class.

6 Steps should be taken immediately to ensure that many more handicapped children, including those severely handicapped, can attend ordinary schools, and capital expenditure programmes on special education should be critically re-examined as a matter of high priority.

7 Central government should give a clear and decisive lead to local authorities as to the desirability of establishing schemes of integration, backed up by the necessary information, guidance and advice.

8 Research should be undertaken with a view to monitoring the progress of integration and investigating the ways in which it can be made to work best.

9 Once their child's handicap is discovered, help must be offered to the parents immediately, and the parents must be fully involved in the placement decision.

10 Every local education authority should appoint an Education Adviser with specific responsibility for handicapped children in ordinary schools.

11 Handicapped people and the parents of handicapped children should be fully involved in the development of schemes of integration.

12 Where integration is taking place, staff must be fully consulted at all stages, must be fully informed about the nature of the children's handicaps and must all be committed to the fullest possible integration, both academic and social, of each child.

13 Visits to schools by handicapped people should be arranged, as in Scandinavia, as part of a programme of promoting an awareness and acceptance of handicap on the part of unhandicapped children.

14 Steps need to be taken to cater for the special needs of handicapped children in relation to transport, access to buildings, assistance, special furniture and equipment, etc. It should be made mandatory for all future educational buildings to be totally accessible for handicapped people.

15 Urgent attention needs to be given to the question of making more therapy of various kinds available to handicapped children in ordinary schools.

16 Many handicapped children will need special teaching help, either in very small groups or on an individual basis. For this reason schools catering for handicapped children to any significant extent should, if possible, have a slightly better than average staff-pupil ratio.

17 Improvements in teacher training with respect to the question of handicap are essential.

18 The temptation to concentrate resources for handicapped students unduly in a few centres of higher and further education should be resisted.

19 If they are to enjoy full equality of opportunity with the unhandicapped, handicapped people need to be better educated than their unhandicapped contemporaries, and a measure of positive discrimination in their favour is therefore necessary.

Appendix 5

Report of the Joint Council for the Education of Handicapped Children

INTEGRATION or SEGREGATION?

A False Alternative

"The child who is physically, mentally, or socially handicapped shall be given the special treatment, education and care required by his particular condition".

Principle 5. The United Nations Declaration of the Rights of the Child.

INTEGRATION OR SEGREGATION FOR HANDICAPPED CHILDREN?

Discussion of this question is widespread. Words have acquired simplifications belying their full meanings. Integration is not merely placement in ordinary school nor is segregation placement in special school. Integration already exists for the vast majority of pupils who need additional help. Ordinary schools will continue to carry the greater responsibility.

Integration and segregation are not mutually exclusive; all situations carry elements of both. An "integrated" unit placed within an ordinary school can experience isolation. The freedom from stress, and the personal relationship within a "segregated" special school can lead to successful integration later.

PATTERNS OF SOCIAL CHANGE.

Inevitably the balance in the proportion of handicapped children in ordinary and special schools will alter. Schools are a microcosm of society and reflect its changing views. Much of the recent re-organization of schools has a sociological basis and links with the concern for the quality of life and the individual's place in society. The irrefutable right of the handicapped to play their full part in society is recognised anew.

This climate of opinion leads to over-simplification e.g. "integration" of handicapped children is always good and by apposition, "segregation" is always bad.

THE PURPOSE AND PROVISION OF SPECIAL SCHOOLS.

The earliest schools, as for the deaf and the blind, were established primarily as protection from a harsh environment. Later the emphasis shifted to providing for the specialised educational needs of the handicapped in an effective and economical way. Evolution of purpose is continuous. Now special schools are adapting to increasing numbers of severely and multiply handicapped children.

Special schools exist:–

(i) to provide specially planned buildings & environments for handicapped children
(ii) to provide a relatively economical pool of specialist equipment
(iii) to be a source of expert knowledge about particular handicaps
(iv) to develop and use specialist teaching techniques where needed
(v) to provide more easily, by the concentration of handicapped children, medical and other specialised services.

Aided by their generally smaller rolls and by more advantageous pupil/teacher ratios, special schools have been able to give greater attention to individual development. They have been able to meet the needs of these handicapped children whose pace of learning and social, physical and emotional development have required intimate groupings within which the teacher could effectively attend to individual needs. They have been better able to accept and help the disturbed and the disruptive, when ordinary schools found great difficulty in accommodating them.

The basic aims of special schools have always been the same as those of ordinary schools – to help pupils to play their part in society and to recognise and respect the interests of every individual.

THE RIGHTS OF THE MAJORITY.

A more enlightened understanding and acceptance of the handicapped begins to prevail but idealistic talk and pence in the charity box do not represent the reality of the handicapped impinging on people's lives. "Integration" also requires acceptance by the majority when it affects them personally. (Parent of a non-handicapped child in a Junior School, at which a Partially Hearing Unit was being opened recently:– "Why here? After all, there is a School for the Deaf in the Borough – it's not fair on the other children"). The presence of handicap or its resultant abnormalities are not always acceptable to parents whose prejudices are often transferred to their children.

Nor do all teachers wish to teach handicapped children or feel they have the ability or temperament to do so.

Headteachers and staffs in ordinary schools have as their foremost duty the fulfilment of the needs of the majority. The needs of the handicapped minority can frequently only be met by the introduction of specialised intensive help. Failing the provision of this, recourse must be made to special provision elsewhere.

The vast majority of admissions to special schools are children transferred from ordinary schools where the system has failed them, or those who are too handicapped to be accepted in the first place.

THE ORGANISATION OF INTEGRATION

Integrated education for the handicapped may be achieved by:–

(i) total "open" education
(ii) units in ordinary schools
(iii) a special school used as a home base for additional resources
(iv) support from a peripatetic service and/or external resources unit.

"OPEN" EDUCATION

Ultimately all schools could be special. This would necessitate additional staff, and special accommodation and equipment, as an in-built part of a unified system.

But to consider the transfer of all special school pupils involves over 132,000 children in England and Wales alone.

How are the ordinary schools faring with those already there? The major group are slow learners. D.E.S. Education Survey 15 found that:–

(i) although L.E.A.'s were invited (Circular 11/61) to provide additional accommodation for backward children in ordinary secondary schools, few had dope so
(ii) in 158 schools surveyed only 54% of children considered by headteachers to need special education were receiving it, and 5.4% were felt to need transfer to special schools. The sample of secondary schools represented in the survey was small, only 5.8% of modern schools and 7.6% of comprehensive schools, yet 682 children were felt to be wrongly placed.

It is thought by some to be a simple matter to integrate those with a mild degree of handicap or those who do not give the appearance of being handicapped. This is not necessarily true for many children e.g. some emotionally disturbed, partially sighted, or language disordered children.

In the ordinary school there are still dangers of over protection. Other children may tend to do work for their handicapped fellows and the staff may have unnecessarily low expectations of performance.

Ordinary schools are involved in a period of rapid educational change which makes it even more difficult for them to provide fully for children with special needs. Goodwill in the school is not enough. The interest and understanding of the headteacher and a positive attitude of sympathy and involvement from all adults and children within the school are required. "Open" education can carry a failure risk.

Nevertheless, if we aim to fit handicapped children to live fully in society, they should be able to mix as much as possible with other children.

UNITS IN ORDINARY SCHOOLS

Units in ordinary schools may seem to be a practical form of special education for handicaps where the numbers are small, yet setting up a unit requires not only the provision of essential accommodation and equipment but also the careful development of positive attitudes within the host school. Without these conditions integrated education becomes integration at the expense of education.

Units hold the danger of the worst solution of all – isolation in a large community, far worse than the loneliness of the small community. Teachers themselves may be isolated and lack the stimulation of colleagues with similar interests. Continuing special educational advice and support may be inadequate. The continuity of the unit is vulnerable due to the illness, absence or movement of the teacher. This is especially true of the single class unit where the child lacks opportunities for adequate progression.

The range and severity of the handicap(s) for which the unit is intended should be clearly defined. This definition should focus upon the educational and social needs of the children. D.E.S. Education Survey 17 (Aspects of Special Education. Schools for Delicate Children. Special Classes in Ordinary Schools) highlights the potential risks inherent in the provision of special education through units.

THE SPECIAL SCHOOL AS A 'HOME BASE'

Part-time integration from the base of a special school supplies a supportive system for handicapped children.

(i) Resources of trained personnel and equipment are available in the special school at all times
(ii) The special school can provide additional time for consolidation since the main problem for some handicapped children is often not the work itself but the work rate
(iii) Expert advice is available to the staff of the ordinary school.

Other advantages are that

(iv) the special school's facilities are extended, and staff and examination opportunities augmented
(v) in working in the ordinary school, the self-confidence and poise which handicapped pupils have acquired can be tested and further developed.

For such a system to succeed it is essential that:–

(i) there should be ready co-operation between staffs and mutual recognition of complementary roles
(ii) there should be a campus site or close proximity of buildings.

Care is needed that the handicapped child does not lose 'identity' between the schools and feel he belongs to neither.

SUPPORTIVE SERVICES EXTERNAL TO THE SCHOOLS

An alternative supportive system can be given by peripatetic staff, trained and experienced in work with the handicapped, who provide specialist teaching to individual children, advise non-specialist staff and organise extra resources in the ordinary school. This service may be an alternative to placement in a special school or unit for a particular handicap, or to boarding school placement for individual handicapped children who live in less populated areas.

It should be clearly understood that it is not easy for peripatetic staff

(i) to provide expertise across a wide range of handicaps
(ii) to act as resource teachers for the whole range of secondary education
(iii) to guarantee sufficient and appropriately timed service.

A peripatetic teacher fulfils a supportive role but cannot totally provide education structured to the child's full individual needs.

THE NEED FOR PLANNING, RESOURCES AND MANPOWER

Complete integration into ordinary classes, properly planned, staffed and equipped is a more expensive service in both money and manpower.

Careful planning should include:–

(i) considering the needs of handicapped children when building new schools or adapting existing schools
(ii) providing additional special apparatus and equipment
(iii) re-appraising basic and in-service teacher training especially regarding techniques required for the teaching of a very varied range of abilities in one group
(iv) giving additional opportunities to teachers to acquire specialist knowledge of handicaps
(v) adjusting staff/pupil ratios according to the handicaps concerned
(vi) stepping-up research and improving the dissemination of findings
(vii) providing supportive services to a much greater degree than already exists for special schools.

It is no help to the handicapped to ignore their limitations or the ways in which they differ. Because the need for integration may vary at different ages, a co-ordinated variety of provision is required. **Planned integration adequately costed and serviced could be a major advance. Integration based on pious hope would be a disaster.**

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Tables

Table 4 from Younghusband, E. *et al.* (1970) *Living with Handicap*, The National Bureau for Co-operation in Child Care.

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pp. 18 (bottom and lower centre left) Pete Addis; *pp. 18 (top left), 19 (top left) and 19 (bottom right)* Maria Bartha; *p. 19 (centre right)* MIND (National Association for Mental Health); *p. 19 (bottom left)* The Spastics Society; *p. 19 (top right)* photo by Margaret Murray, reproduced by permission of MIND.

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Unit 1/2 Special biographies	Unit 10 National perspectives
Unit 3 Family views	Unit 11 Biology and handicap
Unit 4 Education for adult life?	Unit 12 Psychology and special education
Unit 5/6 A special curriculum?	Unit 13 Handicap is social
Unit 7 The professionals	Unit 14 Eradicating handicap
Unit 8 The powers that be	Unit 15 Research in special education
Unit 9 Origins	Unit 16 An alternative system: a special imagination

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